

COMMITMENT FOR MAINTENANCE OF PLANT MATERIALS

WHEREAS, _____,
hereinafter referred to as Applicant, has received approval from Martin County, hereinafter referred to as County, for a project known as _____; and

WHEREAS, Applicant is responsible for the proper installation and maintenance of certain required landscaping for the referenced project.

NOW THEREFORE, the Applicant agrees as follows:

1. The Applicant hereby warrants and guarantees a survival rate of one hundred percent (100%) for all required landscaping as set forth on the approved landscape plan for the project, for a period of twenty-four (24) months following the certification of installation by the landscape architect.
2. In order to ensure adequate maintenance and survivability, the Applicant shall provide the County with security in the amount of \$_____, which represents fifty percent (50%) of the supply and installation cost of the required landscape material. Attached Exhibit A sets forth the supply and installation cost of the landscape material. A copy of the security is attached as Exhibit B.
3. The required landscaping shall be maintained in full compliance with the approved landscape plan, specifications, and requirements of the County. At the completion of the twenty-four (24) month period, the security shall be released upon inspection and approval by the Growth Management Department.
4. In the event the required landscape material is not maintained in compliance with this Commitment, the County shall have and is hereby granted the right to cause the required landscaping to be installed, monitored and maintained, and to use the security provided for payment of all costs and expenses incurred in the completion thereof, including but not limited to, engineering, consultant, legal and contingent costs. Furthermore, it is agreed by the parties hereto that the County shall be reimbursed from the security provided for any damages, either direct or consequential, which the County may sustain as a result of the failure of Applicant

to carry out and execute all of the provisions of this Commitment. The County shall have the option to complete the required landscaping with County employees and equipment, or pursuant to public advertisement and receipt of bids, in the event of Owner's failure or refusal to do so in accordance with the terms of this Commitment.

In the event that the total costs incurred by the County exceed the amount of security provided, such additional costs shall be paid by Applicant on written demand by the Growth Management Department.

5. The Applicant is responsible for requesting inspections consistent with the timetables established herein.
6. Applicant designates the following person as its representative to be contacted and to receive all notices regarding this Commitment:

Name

Address

| | | |
|------|-------|-----|
| City | State | Zip |
|------|-------|-----|

Telephone number

E-mail Address

The date of this Commitment shall be the date on which this Commitment was executed by the Applicant.

(For an individual acting in his own right)

"APPLICANT"

WITNESSES

APPLICANT

Sign: _____

Sign: _____

Name printed: _____

Name printed: _____

Sign: _____

Address: _____

Name printed: _____

Dated: _____

STATE OF _____

COUNTY OF _____

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, by means of [] personal appearance or [] online notarization appeared _____, to me known to be the person described herein and who executed the foregoing, and acknowledged before me that he executed same. He is [] personally known to me or [] has produced _____ as identification.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, _____.

(SEAL/STAMP)

Notary Public

My Commission Expires: _____

(For a corporation)

"APPLICANT"

WITNESSES

CORPORATION NAME

Sign: _____

Sign: _____

Name printed: _____

Title: _____

Sign: _____

Name printed: _____

Name printed: _____

Address: _____

Attest: _____

[CORPORATE SEAL]

Sign: _____

Secretary Name printed:

Dated: _____

STATE OF _____

COUNTY OF _____

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, by means of [] personal appearance or [] online notarization appeared _____, to me known to be the person described herein and who executed the foregoing, and acknowledged before me that he executed same. He is [] personally known to me or [] has produced _____ as identification.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, _____.

(SEAL/STAMP)

Notary Public

My Commission Expires: _____

EXHIBIT "A"
COST ESTIMATE

EXHIBIT "B"

SECURITY