

## **DUST CONTROL APPLICATION**

### APPLICATION DEADLINE JUNE 1<sup>ST</sup> OF EACH CALENDAR YEAR

Applicant Name (Please Print):									
Date:		Phone:							
Mailing Address:		Email:							
Town/City:		Postal Code:							

#### **PROPERTY INFORMATION**

<sup>1</sup> / <sub>4</sub>		Section		Township		Range		W	est of				
Rural Address (blue sign):													
Subdivision Name:									Lot:	E	Block:	Plan:	
<b>REQUIRED DISTANCE:</b> metres x \$6.50/m x 5% GST = \$						AFTER JUNE 1 DEADLINE: metres x \$6.50/m x 5% GST = \$							

I, hereby apply to the County of Wetaskiwin No. 10 for an application of Dust Control for the purposes of controlling dust along a local road adjacent to the land described above.

I hereby acknowledge that I have been advised of and agree with the following:

Signature:

- To prepay a rate of \$6.50 per lineal metre (plus GST). If a late application is approved (i.e. post June 1), the fee shall remain at \$6.50 per lineal metre (plus GST). The standard distance for dust control shall be one hundred metres (100 m) and may be increased or reduced.
- To clearly stake out the portion of road that I wish treated with dust control product. Should the total length staked by the applicant exceed the pre-paid length, the County shall at its discretion, determine the placement of the dust control product without further notification to the applicant.
- That this payment entitles me to only one (1) application and a re-treatment of the dust control area may be requested by the applicant, however re-treatments shall be charged at \$6.50 per lineal metre.
- Acknowledge that the application will be carried out at the discretion of the Director, Public Works, and understand that all work will be carried out as time and resources permit. Further, that **this application does** not guarantee an application within a specified time frame. Dust control services shall only be offered during the period of June 1 to September 1 of each calendar year.
- Acknowledge that the Director of Public Works or his designate, reserve the right to blade and maintain those
  portions of roadway that have received dust control product if in his opinion, the road surface is no longer safe
  for the travelling public. In this event, the resident shall not receive reimbursement or replacement of the dust
  control product.
- I hereby remise, release and forever discharge the County, its officers, contractors, agents, servants, successors and assigns of and from all manner of actions, causes of actions, suits, debts, dues, accounts, covenants, contracts, claims and demands whatsoever which I shall or may have by reason of any cause, matter or thing, whatsoever, and without limiting the generality of the foregoing, from all claims for damages arising in any way whatsoever from the application of dust control material as described herein.
- The County of Wetaskiwin No. 10 will supply two (2) flags. It is the responsibility of the landowner to place the flags in accordance with the amount of dust control purchased.

• Credit card payments will not be accepted over phone

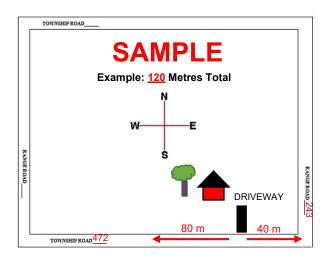
- Payment can be mailed to County office, dropped off at County Administrative Office, Internet/Online Banking or OptionPay (extra fee). See the County of Wetaskiwin website for more information. (under Services then Payment Options)
   If payment made through on-line banking or Optionpay enter
- If payment made through on-line banking or Optionpay enter confirmation # / Transaction ID # \_\_\_\_\_

### **OFFICE USE ONLY:**

Receipt #

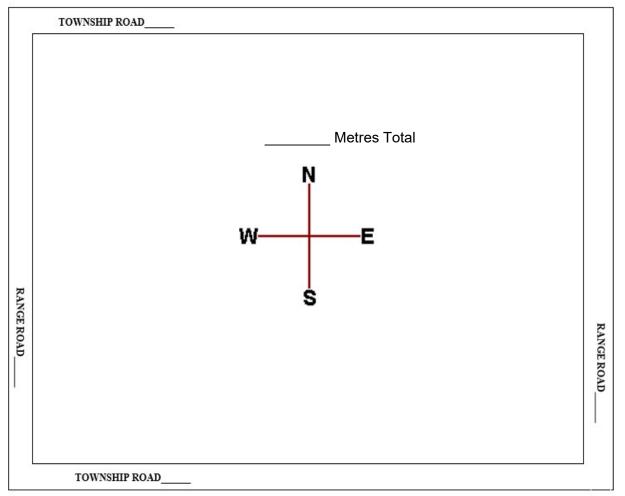
Date Work Completed:

P:\Public Works\Dust Control\Dust Control Application



Please indicate on the map the Range Road / Township Road and mark where you would like the dust control applied.

\*The more information that you can provide on this form, the better job we can do for you.



To ensure the correct placement of the dust control, we ask that you mark your calcium spots (i.e.: wooden stakes with paint, lathe with ribbon or flags)

# I agree to accept the placement of the dust control as per the map location provided. If no map is provided, I agree to accept the placement at the discretion of the County of Wetaskiwin.

#### Initials

**Collection of Personal Information:** 

The personal information on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act. The information will be used to process your application(s) and your name and address may be included on reports that are available to the public. If you have any questions on the collection and use of this information, please contact the FOIP Coordinator at (780) 352-3321.