

Big Lakes County

2016

REQUEST FOR ROADWAY DUST SUPPRESSION STRIP

APPLICANT: _____

MAILING ADDRESS: _____

PHONE NO. RES: _____ BUS: _____

LEGAL DESCRIPTION: _____

RURAL ADDRESS SIGN: _____

I/We, the undersigned, hereby make application for a dust suppression strip to be applied by the Big Lakes County Public Works Department to the county roadway adjacent to my/our residence or other portion of property at the location described and indicated on the plan herein.

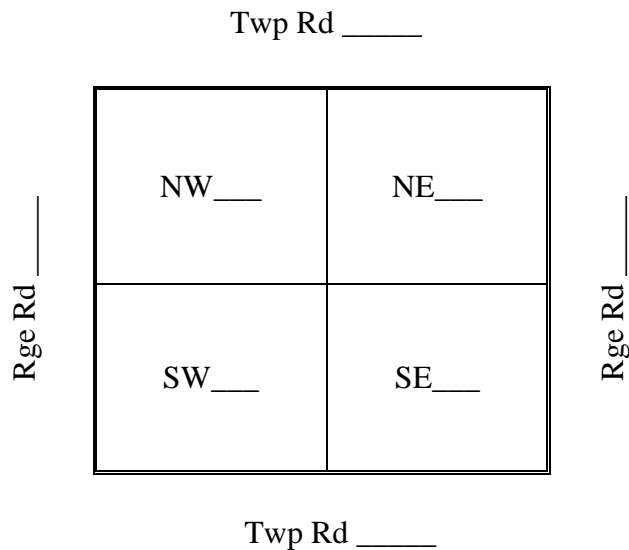
I/We, the undersigned acknowledge and accept the following terms and conditions related to this service:

1. Dust suppression strips are to be applied to the identified road by Big Lakes County Public Works Department upon completion of the appropriate application by the resident/landowner and pre-payment of the calculated fee. Scheduling of the work shall be subject to regular dust suppression program priorities and in combination with other requests due to cost effectiveness.
2. Dust suppression strips shall be a minimum length of 150 m of roadway surface.
3. Big Lakes County does not guarantee the effectiveness of the dust control agent. Once the agent has been applied no refunds of the application fee will be made. All efforts will be made to increase the longevity of the treated area; however, if the need arises the said portion of treated roadway will be graded to minimize hazards for vehicular traffic.

DEADLINE FOR FIRST APPLICATION IS: Friday, MAY 16, 2016

DEADLINE FOR SECOND APPLICATION IS: Friday, JULY 29, 2016

Please illustrate the location of your approach (including Township and Range Road references), as well as the requested distance of dust control.



Calculation of total fee:

FIRST APPLICATION (of the year)
(subsidized cost)

SECOND APPLICATION (of the year)
(1/2 of subsidized cost)

Cost of first 150 metres: \$225.00

Cost of first 150 metres: \$112.50

Additional length: _____

Additional length: _____

Cost of additional length @\$4.50/m: _____

Cost of additional length @\$4.50/m: _____

Subtotal: _____

Subtotal: _____

G.S.T. _____

G.S.T. _____

Total Fee Required: _____

Total Fee Required: _____

Receipt #: _____

Receipt #: _____

Signature of Applicant

Date

The personal information on this form is being collected for the purpose of processing applications for dust control under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act, and is protected by the FOIP Act. If you have any questions about the collection, contact the Big Lakes County FOIP Assistant at phone (780) 523-5955.