County of Paintearth No. 18

Private Land Spraying

Ph: (403) 882-3211 Fax: (403) 882-3560
reception@countypaintearth.ca
#1 Crowfoot Crossing, Box 509 , Castor, AB T0C 0X0

Landowner Information

Name: _____ Address: _____ Town: _____

Postal Code: _____ Phone: _____ Mobile: _____

Operator Information

Date of Application: _____ Pesticide Applicator: _____ Unit Number: _____

Start Time: _____ End Time: _____ Hours Worked: _____

Pesticide Information

Pesticide Applied: _____ PCP#: _____ Rate of Application: _____ Quantity Applied: _____

Area of Application: _____ Major Weed Controlled: _____ Minor Weeds: _____

Weather Conditions

Temperature: _____ Wind Direction: _____ Wind Velocity: _____ Precipitation: _____

Location of Application

Legal Land Description

								W	4
Quarter		Section		Township		Range		Meridian	

GPS Location

Latitude: N _____

Longitude: W _____

In consideration of works and services herein set forth, which may be undertaken or provided by the County or its authorized agents:

I, _____ of _____
being the owner/occupant of the above described lands for the purpose of weed control using herbicides.

I hereby request the assistance of the County in the chemical control of small patches of persistent noxious or prohibited noxious weeds. It has been explained to me which herbicide is to be used and the possible effects of this herbicide.

And I herby agree to indemnify and save harmless the County from any and all losses, cost, damages, actions, causes or action, suits, claims and the demands resulting from anything done or omitted to be done by the County in the performance or purported performance of the said works requested.

And I hereby accept responsibility for all the costs which may be incurred as a result of the undertaking of the said works by the County or any of its authorized agents.

And I willingly give my full permission if I have not paid within 30 days of signing the agreement that the County can add these costs and charges to my tax roll as an additional tax against the above mentioned land to be collected in the same manner as taxes.

_____ _____

Landowner **County of Paintearth No. 18 Employee**

_____

Witness

The personal information provided by you is being collected under the authority of the Municipal Government Act and will be used for the purposes under that Act. The personal information that you provide may be made public, subject to the provisions of the Freedom of Information and Protection of Privacy Act. If you have any questions on the collection and use of this information, please contact the County of Paintearth No. 18 FOIP Coordinator (403) 882.3211.