

# **Dust Control Application**

#### Saddle Hills County

# Signatory Information

The below information is to be filled out by the person submitting this form. They shall henceforth be referred to as "the signatory." The signatory will sign this document on behalf of all parties included in this dust control application.

Name *	Phone Number *	
Cell Phone	Email	
Address		

Name of Resident *	Length of Road to be treated (minimum 100 meters) *
Rural Address *	Road to be treated *
Note: Dust control application will be centered in front of approach unless otherwise specified. Please fill in a description of area to be covered if different	Is this a residential or industrial dust control application? *  Residential Industrial
Cost of treating this segment of road (residential	
Cost of treating this segment of road (industrial)	
Is there an additional dust control application yo	u would like to fill out? *
○ Yes	
∩ No	

Name of Resident *	Length of Road to be treated (minimum 100 meters) *
Rural Address *	Road to be treated *
Note: Dust control application will be centered in front of approach unless otherwise specified. Please fill in a description of area to be covered if different.	Is this a residential or industrial dust control application? *  Residential Industrial
Cost of treating this segment of road (residential	J)
Cost of treating this segment of road (Industrial)	
Is there an additional dust control application yo	u would like to fill out? *
Yes	
○ No	

Name of Resident *	Length of Road to be treated (minimum 100 meters) *
Rural Address *	Road to be treated *
Note: Dust control application will be centered in front of approach unless otherwise specified. Please fill in a description of area to	Is this a residential or industrial dust control application? *
be covered if different.	
	○ Industrial
Cost of treating this segment of road (residential	)
Cost of treating this segment of road (Industrial)	
Is there an additional dust control application yo	u would like to fill out? *
Yes	
○ No	

Name of Resident *	Length of Road to be treated (minimum 100 meters) *
Rural Address *	Road to be treated *
Remarks/Additional Information	Is this a residential or industrial road? *
	Residential
	◯ Industrial
Cost of treating this segment of road (residual)	dential)
Cost of treating this segment of road (Indu	ustrial)
Is there an additional length of road to add	d to the application? *
○ Yes	
○ No	

Name of Resident *	Length of Road to be treated (minimum 100 meters) *
Please insert your Rural Address *	Road to be treated *
Note: Dust control application will be centered in front of approach unless otherwise specified. Please fill in a description of area to be covered if different.	Is this a residential or industrial road? *  Residential Industrial
Cost of treating this segment of road (residential	)
Cost of treating this segment of road (Industrial)	

I/We, the undersigned, hereby are applying for dust control treatment to be applied on the road adjacent to the residences specified above with a dust control agent as determined by the Saddle Hills County.

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

- 1. That a section of roadway in front of the residence shall be treated with a dust control agent.
- 2. That only one dust control treatment will be made with respect to this application.
- 3. Saddle Hill County does not guarantee the effectiveness of the dust control agent. Once the agent has been applied, no refunds will be made.
- 4. Saddle Hills County reserves the right to maintain the treated section of roadway as deemed necessary and further to return the roadway to its original gravel condition at such time as determined by the Director of Operations.
- 5. Payment must be submitted with residential dust control application.
- 6. The application must be submitted by April 30 to ensure consideration for this year's program.

#### Please sign in the box below

#### **Notice of Collection**

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of determining eligibility and costs for dust control services provided by Saddle Hills County. Upon appointment, your identifying information may be released to the general public. Direct any questions about this collection to: FOIP Coordinator, Saddle Hills County, RR 1, Spirit River, Alberta, Canada, T0H 3G0, 1-888-864-3760.

Please send me a pdf copy of this form	Email address for copy of form *
Yes	
∩ No	

# **Payment**

A summary of payment for dust control is laid out below. Please note, payment must be received before dust control can be applied.

Subtotal (prior to GST)	GST
Total	