

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		

 \circ 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? * O Residential O Industrial
Cost of treating this segment of road (residential)	
Cost of treating this segment of road (industrial)	
Is there an additional dust control application you v	would like to fill out? *

 \circ 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? * O Residential O Industrial
Cost of treating this segment of road (residential)	
Cost of treating this segment of road (Industrial)	
Is there an additional dust control application you v	would like to fill out? *

 \circ 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? * O Residential O Industrial
Cost of treating this segment of road (residential)	
Cost of treating this segment of road (Industrial)	
Is there an additional dust control application you v	would like to fill out? *

 \circ 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? * O Residential O Industrial
Cost of treating this segment of road (residential)	
Cost of treating this segment of road (Industrial)	
Is there an additional length of road to add to the a	application? *

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? * O Residential O 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

The personal information on this form is being collected for the purpose of determining eligibility and cost for dust control services and will be shared with Council and Administration. The information is collected under the authority of Section 146 of the Municipal Government Act and Section 4 of the Protection of Privacy Act. For questions about the collection of personal information, contact admin@saddlehills.ab.ca or call (780) 864-3760.

	Email address for copy of form *
O 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	