

2016 ANNUAL PERMIT TO APPLY DUST CONTROL MATERIAL ON WAPELLO COUNTY SECONDARY ROADS

TO THE APPLICANT: Please fill out and turn in this permit application and fee to the contractor who is applying the dust control. Your contractor will then forward this form to the Wapello County Secondary Road Department for review and approval. After approval, the County will prepare the dust control area by blading and/or rocking prior to application of the dust control material.

APPLICANT (Please print): _____

STREET ADDRESS _____

CITY, ZIP CODE _____

PHONE # OF APPLICANT _____

EMAIL ADDRESS _____

LOCATION OF DUST CONTROL, if not same address as above:

(E911 Street Address) _____

(City) _____

Length of application to be applied _____

Name of contractor providing service: _____

Number of applications _____

(2 for full season dust control)

I, applicant, have contracted with the above mentioned contractor to apply a dust control material to a Wapello County road. I have read the Wapello County Dust Control Policy and I am aware that the County may, at any time deemed necessary, blade through this dust control area or add rock. I am also aware that in October my dust control area will be bladed and/or rocked in preparation for winter. **I am aware that my green flags must be up and visible through October.**

Initial here

Applicant Signature: _____ Date _____

Important Dates:

- | | |
|-----------------------|--------------------------------------|
| May 2nd | Dust control permits are due |
| May 9th - May 20th | Roads prepared for 1st application |
| May 23rd - Jun 3rd | Vendors apply dust control treatment |
| July 18th - July 29th | Roads prepared for 2nd application |
| Aug 1st - Aug 12th | Vendors apply dust control treatment |
| Oct 1st - 31st | Roads prepared for winter |

For Office Use Only

section _____	twp _____	terr _____	permit # _____
Checked & approved by Wapello County (Initial): <input style="width: 50px; height: 20px;" type="text"/>			Date: _____