

Engineering/Secondary Roads Department
609 1st Avenue N., Suite 4
Estherville, IA 51334
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No Spray Application Form

APPLICANT INFORMATION (PLEASE PRINT CLEARLY OR TYPE)

Applicant Name: _____ **Owner Name** (if different): _____

Mailing Address: _____
(Street Address) (City) (State) (Zip)

Phone Number: _____ **Email:** _____

NO SPRAY LOCATION

Address/Road Name: _____ **Township:** _____ **Sec. No.:** _____

Location Description: _____

(Example: "Centered on house" or "From 200' N of driveway to 100' S of driveway")

Side of road (North, South, East, or West): _____ **Length of location:** _____ FT.

APPLICANT RESPONSIBILITIES:

1. Maintenance and installation of official 'No Spray' signage.
 - a. Applicant is responsible for completing their own Iowa One Call or 1-800-292-8989 for utility location required for installation or digging.
 - b. Signs are to be mounted and visually unobstructed at least three feet above the ground line.
 - c. Applicant agrees to pay for each sign and metal post. If signs and posts are in good condition they may be reused.
2. Applicant shall place a sign at the beginning of the no spray area and another sign at the end of the no spray area. Signs must be visible and able to read from the road and facing the direction of on-coming traffic.
3. Control of noxious weeds (as listed in Chapter 317 of the Iowa Code), trees and brush within designated No Spray Location.

In signing and accepting this No Spray Application I agree to control the growth of noxious weeds, trees and brush within No Spray Location as listed above and according to the Emmet County No Spray Application Policy. If Applicant does not control noxious weeds, trees and brush within designated No Spray Location the County may cut, spray, or otherwise control the noxious weeds, trees and brush according to County practice and this Application shall be null and void.

Applicant Signature: _____ **Date:** _____

FOR COUNTY USE ONLY

Special Provisions: _____

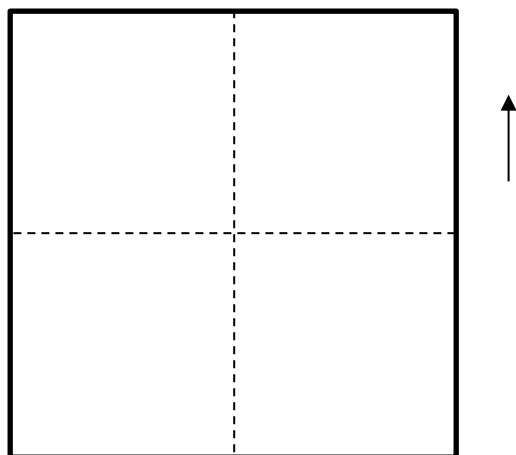
Number of Signs: _____ **Amount Due: \$** _____

Authorized By: _____ **Date:** _____

Please use the following diagram of a typical section to locate the proposed No Spray Location area.

Sec. No. _____

Twp. _____



To indicate the approximate site where spraying should be omitted, place an “X” at the beginning of the location and an “X” at the end of the locality. (The contractor has been instructed not to spray in front of any rural residence, so signs are not needed at these locations.)