



WEED CONTROL AGREEMENT

I, _____ do not want the road right-of-way adjacent to the _____
_____ side(s) of ...

_____ Quarter Section _____ Township _____ Range _____ W4, and

_____ Quarter Section _____ Township _____ Range _____ W4, and

_____ Quarter Section _____ Township _____ Range _____ W4, or

Lot(s) _____ Block _____ Plan _____ in _____

(Subdivision name)

Sprayed with herbicides for the control of weeds or brush.

I agree to assume full responsibility for the control of weed infestations along that property during the current and future years unless I notify the M.D. of Bonnyville No. 87 otherwise. I understand that failure to control these weeds to a satisfactory level may result in the spraying of the ditches with a broadleaf herbicide.

Name (please print)

Signature

Witness

Address

Phone Number