

APPLICATION FORM

No Treatment Zone Brush Control Program

VAN BUREN COUNTY ROAD COMMISSION
325 West James Street, Post Office Box 156
Lawrence, Michigan 49064

Telephone: (269) 674-8011 Fax: (269) 674-3770 Email: vbcrc@vbcrc.org

The undersigned hereby requests that the Van Buren County Road Commission omit the herbicide treatment of weeds, brush and/or low hanging tree limbs along the county road right of way abutting property owned by me and generally described as follows:

Township of: _____ Section No: _____

Property Address: _____

Nearest Cross Roads or Identifying Information:

Between: _____ and _____

Circle Side of Road on Which Property is Located: North South East West

In consideration of the County's approval of the requested NO TREATMENT ZONE, the undersigned agrees to accept the responsibility for maintaining the roadside area by the yearly cutting of all roadside weeds, brush and trimming low hanging tree limbs. The area to be maintained being a minimum distance of 15 feet off the traveled portion of the road and 15 feet above the road surface.

As the Applicant, I understand and agree that in such event as the roadside weeds, brush and/or tree limbs are not cut or otherwise removed at the time of County operations, the Road Commission reserves the right to remove same, acting in its sole discretion.

If approved, the Road Commission agrees to honor this permit for One (1) year subject to the conditions herein.

Submitted By: _____ Date: _____

Signature

Print Name

Street Address

City, State and Zip Code

Telephone

Email Address: PLEASE PRINT CLEARLY

Return to: Van Buren County Road Commission, 325 W. James St., Post Office Box 156, Lawrence, Michigan 49064, Fax Number 269-674-3770, Email Address: JillBrien@vbcrc.org