LAP PARTICIPATION FORM

LANDOWNER:_____ **RENTER :**_____

ADDRESS: _____ _____ **CITY/STATE/ZIP CODE:** _____

PHONE:_____ _____

HERBICIDE APPLICATION CERTIFICATE NUMBER: _____ **EXP. DATE:** _____**CATEGORY:**_____

HEREINAFTER REFERED TO AS THE PARTICIPANT, HEREBY CONTRACTS AND AGREES TO THE FOLLOWING TERMS AND CONDITIONS IN CONSIDERATION FOR BEING ALLOWED TO PARTICIPATE IN THE COST SHARE PROGRAM OF THE MORTON COUNTY WEED BOARD.

1. THE PARTICIPANT HERBY ALLOWS THE COUNTY WEED BOARD OFFICER FULL ACCESS TO THE PARTICIPANT'S PROPERTY FOR THE PURPOSE OF INSPECTIONG SAID PROPERTY TO DETERMINE WHETHER OR NOT HE/SHE IS COMPLYING WITH THE TERMS OF THIS AGREEMENT. THE WEED CONTROL OFFICER WILL BE SPOT CHECKING PARTICIPANT'S COMPLIANCE ON A RANDOM BASIS.
2. THE PARTICIPANT AGREES TO TAKE FULL RESPONSIBILITY AND ASSUME FULL LIABILITY RESULTING FROM THE APPLICATION OF CHEMICAL USED BY HIM/HER ON HIS/HER PROPERTY.
3. THE PARTICIPANT AGREES TO FURNISH ASC MAPS TO THE WEED BOARD ON ALL LAND THAT HAS NOXIOUS WEEDS TO BE CONTROLED ON IT.

TORDON 22K EPA REG NO. 62719-6 **NUMBER OF GALLONS PURCHASED**: _____

THE PARTICIPANT AND THE MORTON COUNTY WEED BOARD HEREBY AGREES THAT THIS CONTRACT IS TO BE EFFECTIVE UNTIL THE TORDON 22K COST SHARE PROGRAM OF THE MORTON COUNTY WEED BOARD IS DISCONTINUED.

LAND DESCRIPTION:

QUARTER:	SECTION:	TOWNSHIP:	RANGE:	NUMBER OF ACRES INFECTED

PLATEAU EPA REG NO. 241-365 **NUMBER OF GALLONS PURCHASED**: _____

THE PARTICIPANT AND THE MORTON COUNTY WEED BOARD HEREBY AGREES THAT THIS CONTRACT IS TO BE EFFECTIVE UNTIL THE PLATEAU COST SHARE PROGRAM OF THE MORTON COUNTY WEED BOARD IS DISCONTINUED.

LAND DESCRIPTION:

QUARTER:	SECTION:	TOWNSHIP:	RANGE:	NUMBER OF ACRES INFECTED

PLEASE CONTINUE TO OTHER SIDE →

MILESTONE EPA REG NO. 62719-519 **NUMBER OF QUARTS PURCHASED**: _____

THE PARTICIPANT AND THE MORTON COUNTY WEED BOARD HEREBY AGREES THAT THIS CONTRACT IS TO BE EFFECTIVE UNTIL THE MILESTONE COST SHARE PROGRAM OF THE MORTON COUNTY WEED BOARD IS DISCONTINUED.

LAND DESCRIPTION:

QUARTER:	SECTION:	TOWNSHIP:	RANGE:	NUMBER OF ACRES INFECTED

CURTAIL EPA REG NO. 62719-48 **NUMBER OF GALLONS PURCHASED**: _____

THE PARTICIPANT AND THE MORTON COUNTY WEED BOARD HEREBY AGREES THAT THIS CONTRACT IS TO BE EFFECTIVE UNTIL THE CURTAIL COST SHARE PROGRAM OF THE MORTON COUNTY WEED BOARD IS DISCONTINUED.

LAND DESCRIPTION:

QUARTER:	SECTION:	TOWNSHIP:	RANGE:	NUMBER OF ACRES INFECTED

IN CONSIDERATION FOR THE PARTICIPANT ENTERING INTO THIS AGREEMENT, THE MORTON COUNTY WEED BOARD HERBY AGGREES TO ALLOW THE NAMED PARTICIPANT TO PARTICIPATE IN THE LANDOWNER ASSISTANCE PROGRAM OF THE MORTON COUNTY WEED BOARD, SUBJECT TO THE REQUIREMENTS, RESTRICTIONS LIMITS SET FORTH.

X _____ **X** _____

PARTICIPANT SIGNITURE **DATE** **WEED CONTROL OFFICER/ SELLER** **DATE**

_____ _____

SELLER'S COMMERCIAL APPLICATOR LICENSE # **EXPIRATION DATE**

(OFFICE USE ONLY)

		COUNTY SHARE	PARTICIPANT COST SHARE
GAL. of Tordon @ $ = %MATCH			
QTS. of Milestone @ $ = %MATCH			
GAL. of Plateau @ $ = %MATCH			
GAL. of Curtail @ $ = %MATCH			
TOTAL GALLONS		TOTAL:	TOTAL: