

Integrated Roadside Vegetation Management

1215 Edgington Ave Suite 1 Eldora, Iowa 50627 Phone: 641-849-0333

No Spray Application

Application No.: S-

		Application Fee: FREE	
APPLICANT INFOR	MATION (PLEASE PRINT CLI	EARLY OR TYPE)	
Applicant Name: Mailing Address:	Owner Name (if different):		
Maining Address.	(Street Address)	(City)	(State) (Zip)
Phone Number:		Cell Phone No.:	
NO SPRAY LOCAT	ION		* Please Include Map of Area
		Township	Sec.:
		Township:	Sec
Location Description:	(Example: "Centered on ho	use" or "From 200' N of driveway to 100'	S of driveway")
Applicant Responsibi		Length of location:	FT.
a. App b. App 2. Signs are to 3. Control under limit site dis	blicants must pick up No Spray si be mounted at least four (4) feet a esirable vegetation in accordance tance, compromise utilities or the Alteration of the Right-of-Way	11 or 1-800-292-8989 prior to any sign ins ignage from the IRVM shop, 1704 5 th Ave above the ground line and placed within the with Chapter 317 of the Iowa Code. Also	e., Eldora, IA 50627. Aree (3) feet of the right-of-way line. Includes brush and trees that may
otherwise control the	noxious weeds, trees and brush a	brush within designated No Spray Location coording to County practice and this Appl brush removal by utility companies or oth	ication shall be terminated. This
Applicant Signature:		Date:	
FOR COUNTY USE	ONLY		
Special Provisions:			
Signs: Authorized By:		@ \$15.00 per sign Additional Fees	