



Dust Suppressant Application

Applicant's Name:	Phone Number:
Email Address:	
Mailing Address:	
Legal Land Location:	
Length (meters):	Width (meters):

Please indicate below the proposed location of application of the dust suppressant, including locations of flags/stakes.

I have read and understood the dust control policy. I acknowledge that the road may be graveled &/or graded at the discretion of the municipality, with no compensation.

Applicant's Signature:

Date

Forms Must be submitted to RM Office by April 30th

Box 340, Spiritwood, SK. S0J 2M0

Email: admin@rmofspiritwood.ca

Office Use Only

Date Application Received: _____ Approved: Yes No

Foreman Signature: _____