



SCHEDULE "A"
TS 012 DUST SUPPRESSANT APPLICATION
RM OF MEADOW LAKE #588

Date: _____

Name of Applicant: _____

Address of Applicant: _____

Phone Number of Applicant: _____

Land Location of Application of Product: _____
Township/Range Road applicable

Name of Licensed Applicator: _____

(address and contact phone number for applicator)

Type of Product to be used: _____
(attach product information sheet)

Signature of Applicant

Decision of RM of Meadow Lake #588

1. Applicant understands that the road will continue to be maintained on the regular maintenance schedule and this may affect the length of the product life.
2. Product must meet the regulations of Sask. Environmental standards.
3. Product must be applied so as to facilitate the safety of the travelling public on the road in this application.
4. Applicant is responsible for the total cost of the product and application of the product.
5. Applicant must contact RM of Meadow Lake #588 prior to application. 306-236-5651.

Administrator/CAO