Dust Control Permit No.

Expiration Date \_\_\_\_\_

#### PERMIT APPLICATION FOR

## SURFACE APPLICATION OF DUST CONTROL MATERIAL

## IN BOONE COUNTY, IOWA

Applicant Name:	Tele. #:
Mailing Address:	_ Cell #:
City, State, Zip:	-
E-mail Address:	_
Dust Control Location (Township, Section):	
Dust Control Location (E-911 Address):	
Number of Applications (Check all that apply):	
First Application (May) Second Appli	cation (July)
Footage (400' standard):	
Type of chemicals proposed to be used:	
***************************************	
Contractor Name (if different from applicant):	
Tele. #:	
Mailing Address:	-
City, State, Zip:	-
E-mail Address:	-

I have read the entire permit and have provided all data called for herein truthfully and correctly and I agree to abide by all general provisions set forth herein, including those found on the reverse side hereof. I have also read and agree to the indemnification statement included within the general provisions. I will place flags to mark the area to be treated with the dust control material. I understand that the roads will be bladed after October 15<sup>th</sup> for the winter season.

# **GENERAL PROVISIONS**

The applicant shall place flags (provided by Boone County) to mark the area to be treated with the dust control and flags shall remain in place for the duration of the season.

Boone County shall continue to perform the necessary maintenance and construction functions required within and upon the treated roadway. If potholes or washboards develop, the surface will be lightly bladed to fill the depressions. Any damage, or possible damage, of the treated roadway resulting from any operation by Boone county shall in no way obligate Boone County for its repair or restoration.

Financing of the dust control application shall be the sole responsibility of the applicant.

Roads will be bladed for the winter season after October 15<sup>th</sup>.

#### **\*\*THE USE OF WASTE OIL IS BANNED\*\***

Dust control permit application must be completed ANNUALLY.

The applicant shall be responsible for placing the appropriate signs and barricades for the operation.

Applicant hereby releases, waives, discharges and covenants not to sue Boone County its employees, officers, directors, supervisors, elected officials, agents and assigns ("Releasees") from any and all liability to the applicant, its/their personal representatives, assigns, heirs and next of kin, for any and all loss, damage, demand or cost, including but not limited to injury to property, person or death of the applicant, arising out of or related to the loss, damage, claim, demand or cost arising out of or related to the rights conferred, the benefits provided or the subject of this permit, whether caused by the negligence of the Releasees or otherwise.

Applicant further agrees to indemnify, defend and hold harmless the Releasees and each of them from any and all loss, damage, claim or demand by any other person or party, including but not limited to injury to property, person or death, arising out of or related to the use of the property or premises licensed for use pursuant to this permit, or for any loss, damage, claim, demand or cost arising out of or related to the rights conferred, the benefits provided or the subject of this permit, whether caused by the negligence of the Releasees or otherwise.