No Spray Application





Date:						
Applicants Name:						
Contact Phone:						
Postal Address:			Postc	ode:		
Email Address:						
NB: Frontages of propertion	s not owned by	the applicant car	nnot be included	d		
No Spray Options (Ple	ase put a cros	s in the box(es)	you <u>DO NOT</u> v	vant sprayed):		
Total Vegetation Contro	ol	Adjacent to the ro		gns, marker posts, ditche	s, footpath berms etc.	
Pest Plant		-		on the road reserve i.e. §	gorse, broom etc.	
Frontage Not to be Spr	ayed:					
Name of Road:						
Valuation Reference:						
programmes. 2. Applicants the plants on the areas as par adequately constants. 3. Applicants with a programmes.	n only apply at have applic ir road front t of the spra ntrolled.	y to have the ed to be on the ages to a minimaying programm	by readily reco	d frontages exclusive egister must keep is not done then e public safety a		praying nd pest these nts are
I have read and signed	Terms and Co	nditions above				
Signature:			Date:			
Office use only			Permit Number			
Application: APPROVED / NOT	APPROVED		,			
Terms and Conditions Acknowle			Map supplied YES	i/NO		
Signature:			Date:			

Map Showing Frontage to be Excluded						