



# County of Warner Roadside Haying Application

<b>Applicant Name</b>		<b>Date</b>	
<b>Phone</b>		<b>Email</b>	
<b>Mailing Address</b>			
<b>Address</b>			

**Describe project in Detail. Provide marked up map showing the roads requested.**

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## Terms and Conditions

Application must be received no later than May 1<sup>st</sup> by the County of Warner

Applications can be sent to: [lliebelt@warnercounty.ca](mailto:lliebelt@warnercounty.ca)

All applicants permitted to hay municipal right of ways must have the haying completed by July 15 of each year.

Applicant to supply general liability insurance coverage of not less than 2 million per incident.

Applicant waives all claims, rights or causes of action of every nature and kind at law or equity or under any statute that it has or may have in the future against the County or its councillors, officers, employees and agents; and forever releases the County or its councillors, officers, employees, and agents from any and all liability; related to injury, death, property damage, property loss or any other loss or expense that may be suffered by the Harvester or, to the extent legally possible, its employees, agents, next of kin or legal representatives, resulting directly or indirectly from, or in any way attributable to the work as provided by this agreement. The County reserves the right to spray and or treat prevalent weed infestations within the County Road allowances. County of Warner ASB Department will review the area and will determine if roadside spraying is deemed necessary.

The Contractor acknowledges and agrees however that there may be herbicide residue on the land as a result of municipal previous weed control.

Bales must be removed within 72 Hours. If the bales have been left longer the County may remove them and dispose of them.

Where more than one application is received for cutting in a particular roadside preference will be given to the adjacent landowner.

The applicant agrees to the terms and conditions outlined on this application form.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## Office Use Only

Approved/Denied		Date	
Roadside Haying Authorization Number	RH-		
County Representative name and signature			
County Representative Comments/Conditions			