

**VAN BUREN COUNTY HIGHWAY DEPARTMENT**

Permit to apply Dust Control Treatment

Refer inquires to: Van Buren County Engineer's Office, P.O. Box 494, Keosauqua, Iowa 52565  
Phone 319/293/3663 fax 319/293/6222

***This permit is subject to the following conditions:***

- 1. ***The applicant shall obtain this permit a minimum of two weeks in advance of treatment in order to give the Van Buren County Road Department time to blade and shape the road.***
- 2. ***Only Calcium Chloride, Magnesium Chloride, Lignin Sulfate (tree sap), or a combination of these products will be approved. All applicators shall provide proof of liability insurance and the Material Safety Data Sheet on the product to our office prior to application.***

***ONLY PRODUCTS APPROVED BY THE COUNTY ENGINEER MAY BE PLACED ON THE ROAD!!***

- 3. ***The Road Department will maintain/grade the road surface if it is needed, as determined by the Engineer. We will try to keep from damaging the dust treatment, but this Department is responsible to keep a safe roadway surface. The Road Department may destroy dust treatment after the first of October as part of their annual road maintaining process.***
- 4. ***This agreement expires on November 1<sup>st</sup> of the present year.***

*Having read the above conditions, we, the undersigned, hereby make application to Van Buren County for permission to apply the following product for the purpose of dust control.*

Township name \_\_\_\_\_ Section \_\_\_\_\_

Describe where dust control is to be placed: \_\_\_\_\_

Length \_\_\_\_\_ Number of applications \_\_\_\_\_

Please mark only one of the following products:

Binns & Stevens: \_\_\_\_\_ calcium chloride

Whaleys: \_\_\_\_\_ calcium chloride \_\_\_\_\_ lignin sulfate (tree sap) \_\_\_\_\_ combination of tree sap & magnesium chloride

Farmers Coop: \_\_\_\_\_ lignin sulfate (tree sap)

Golden Furrow, Keosauqua: \_\_\_\_\_ lignin sulfate (tree sap)

Other: \_\_\_\_\_

Date \_\_\_\_\_ Applicant's Name and Signature \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_

**\*\*\*\*Do Not Write Below This Line\*\*\*\***

Approved Date \_\_\_\_\_ Van Buren County Engineer \_\_\_\_\_