

<https://land.nd.gov>

<b><u>This box for Internal Use Only:</u></b>	Approved: ___ Yes ___ No	Date: _____
DTL: \$ _____	Notes: _____	Reviewer: _____
Lessee: \$ _____		
Total: \$ _____		

## Noxious Weed/Pest Control Cost Share Application

**Must be postmarked by October 31<sup>st</sup> of each year**

*(If you wish to request an extension, call 701-328-1926)*

*If you have not previously used this cost share program before, please call the Department of Trust Lands to obtain funding approval prior to completing any work.*

### Complete the following for each Section where weeds/pests were controlled:

*(see next page/back for additional sections)*

SEC \_\_\_ TWP \_\_\_ RNG \_\_\_

Date(s) of Application: \_\_\_\_\_

Estimated Acres Sprayed \_\_\_\_\_

Targeted Weed(s): \_\_\_\_\_

Indicate area sprayed below:

NW4	NE4
SW4	SE4

<u>Itemized Chemical Costs</u>			Cost (\$)
Chemical Name	Rate/Acre <small>(include units)</small>	Total Amount Used <small>(circle unit of measurement)</small>	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
<u>Itemized Labor Costs</u>			Cost (\$)
# of Hours _____		\$/Hour _____	
# of Acres _____		\$/Acre _____	
Custom Application (provide receipts):			
<b>Total:</b>			

# of People Spraying \_\_\_\_\_

What equipment did you use to spray?

- \_\_\_ Field Sprayer (width: \_\_\_\_\_)
- \_\_\_ ATV/UTV Sprayer (width: \_\_\_\_\_)
- \_\_\_ Small Hand Sprayer
- \_\_\_ Other: \_\_\_\_\_

***I hereby confirm that the information I have provided is an accurate account of the weeds/pests control work done.***

\_\_\_\_\_  
 Lessee Name (Print & Signature)

\_\_\_\_\_  
 Date

### **IMPORTANT**

**If cost share is anticipated to be greater than \$200.00, the county weed control officer is required to sign below and receipt copies need to be attached.**

***I hereby confirm that the described noxious weed(s) control work was completed.***

\_\_\_\_\_  
 County Weed Control Officer (Print & Signature)

\_\_\_\_\_  
 County

\_\_\_\_\_  
 Date

**Additional Noxious Weed/Pest Control Forms:**

SEC \_\_\_\_ TWP \_\_\_\_ RNG \_\_\_\_

Estimated Acres Sprayed \_\_\_\_

Indicate area sprayed below:

NW4	NE4
SW4	SE4

# of People Spraying \_\_\_\_

What equipment did you use to spray?

- Field Sprayer (width: \_\_\_\_\_)
- ATV/UTV Sprayer (width: \_\_\_\_\_)
- Small Hand Sprayer
- Other: \_\_\_\_\_

Date(s) of Application: \_\_\_\_\_

Targeted Weed(s): \_\_\_\_\_

<u>Itemized Chemical Costs</u>			Cost (\$)
Chemical Name	Rate/Acre <small>(include units)</small>	Total Amount Used <small>(circle unit of measurement)</small>	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
<u>Itemized Labor Costs</u>			Cost (\$)
# of Hours _____		\$/Hour _____	
# of Acres _____		\$/Acre _____	
Custom Application (provide receipts):			
<b>Total:</b>			

SEC \_\_\_\_ TWP \_\_\_\_ RNG \_\_\_\_

Estimated Acres Sprayed \_\_\_\_

Indicate area sprayed below:

NW4	NE4
SW4	SE4

# of People Spraying \_\_\_\_

What equipment did you use to spray?

- Field Sprayer (width: \_\_\_\_\_)
- ATV/UTV Sprayer (width: \_\_\_\_\_)
- Small Hand Sprayer
- Other: \_\_\_\_\_

Date(s) of Application: \_\_\_\_\_

Targeted Weed(s): \_\_\_\_\_

<u>Itemized Chemical Costs</u>			Cost (\$)
Chemical Name	Rate/Acre <small>(include units)</small>	Total Amount Used <small>(circle unit of measurement)</small>	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
		gal qt pt oz	
<u>Itemized Labor Costs</u>			Cost (\$)
# of Hours _____		\$/Hour _____	
# of Acres _____		\$/Acre _____	
Custom Application (provide receipts):			
<b>Total:</b>			