

Date: \_\_\_\_\_

**Custom Work Request**

- Grading       Mowing       Weed Spraying

**Applicant Information**

- Owner       Renter

Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email \_\_\_\_\_

**Land Information for Custom Work**

Civic Address \_\_\_\_\_

Quarter \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ Meridian \_\_\_\_\_

Additional land information \_\_\_\_\_

**Description of Work**

\_\_\_\_\_  
 \_\_\_\_\_

I hereby make application and authorize the RM of Corman Park (Municipality) or authorized contractor to perform custom work on my behalf. I agree to indemnify and save harmless the Municipality of any and all consequential damages to property concealed. I further understand that the work will only be performed when the equipment is in the area and when time permits (grading and mowing) or subject to contractor availability and weather conditions (spraying).

**I agree to pay the Municipality for the custom work at the current rates as set by the Public Works Fee Bylaw 04/24 (mowing and grading), or the Weed Spraying Price List located at <https://www.rm-cormanpark.ca/331/Weed-Control>.** In the event that the charges for the work done are not paid within 30 days of the billing date, I agree that interest will be added at the rate of 1% per month and any unpaid bills will be added to and form part of the taxes at year-end. The RM of Corman Park may refuse services for delinquent accounts.

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

Office Use Only	Public Work Operator
Roll #:	Hours:
Invoice Date:	Zone #:
Account #:	Unit #:
Billing Amount:	Operator Name:
Data Entered By:	Date Work Performed: