

CUSTOM WORK APPLICATION FORM

DATE OF APPLICATION _____

APPLICANT'S NAME _____

MAILING ADDRESS _____

PHONE (HOME) _____

PHONE (CELL) _____

LAND LOCATION OF CUSTOM WORK: _____

DESCRIPTION OF CUSTOM WORK TO BE DONE:

I hereby make application and authorize the municipality to perform the requested custom work on my behalf. I agree to indemnify and save harmless the municipality of any and all consequential damages to property concealed. I agree that I am responsible to ensure utility locates are completed. I understand that the work will only be performed when the equipment is in the area and when time permits. I further understand that if the work is required immediately, that I will be charged from the time the equipment starts en-route until the requested work is completed.

I agree to pay the charges for the requested custom work within 30 days of the billing date. I further agree that interest will be added at the rate of 1% per month if not paid within 30 days of the date of billing, and that any unpaid bills will be added to and form part of the property taxes at year end.

SIGNATURE OF APPLICANT

CUSTOM WORK RATES (Effective August 03, 2022, Non rate Payer rate Effective November 18, 2024)

Grader - \$200/hr * Minimum half hour charge per piece of equipment *
\$225/hr – Non rate payer rate

| TO BE COMPLETED BY OPERATOR: | TO BE COMPLETED BY OFFICE: |
|------------------------------|----------------------------|
| DIVISION OF WORK _____ | DATE BILLED _____ |
| DATE WORK PERFORMED _____ | INVOICE # _____ |
| OPERATOR SIGNATURE _____ | INITIALS _____ |