

BEAVER FLOOD CONTROL APPLICATION

\$200.00 + GST per Dam

Name:	Date: Phone: Postal Code:	
Address:		
WORK REQUESTED:		
LOCATION: 1/4 SEC TV	VP RGE.	W5M
REASON CONTROL REQUIRED:		
		o pay all charges pertaining , as set by the Woodlands ices Board Policy.
Witness	Applicant's Signature	
Draw in the approximate location of the beaver dams and shade the damaged areas.	NW .	NE
Number of Acres Flooded	SW	SE
OFFICE USE	ONLY	
No. of Dams Paid For: Amount Paid:	Receipt:	
INSPECTOR COMMENTS:		
Number of Dams Blown:	Date:	
Number of Sticks Used	1:	_
Number of Fuses Used	:	-
Invoice applicant for dams.		
INICI	DECTOD'S SIGNATUDE	

This information is being collected in accordance with Section 32 (c) of the Freedom of Information and Protection of Privacy Act and is being collected for the purpose of entering into an agreement for services as well as for billing purposes. Our F.O.I.P. Coordinator is available to answer any questions you may have pertaining to the collection and use of the information herein and may be contacted at (780) 778-8400.