



**BEAVER FLOOD CONTROL APPLICATION**

**\$200.00 + GST per Dam**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

\_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**WORK REQUESTED:**

**LOCATION:** \_\_\_\_\_ 1/4 SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RGE. \_\_\_\_\_ W5M

**REASON CONTROL REQUIRED:** \_\_\_\_\_

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

I the undersigned agree to pay all charges pertaining to beaver flood control, as set by the Woodlands County Agriculture Services Board Policy.

\_\_\_\_\_  
**Witness**

\_\_\_\_\_  
**Applicant's Signature**

Draw in the approximate location of the beaver dams and shade the damaged areas.

Number of Acres Flooded \_\_\_\_\_

NW	NE
SW	SE

**OFFICE USE ONLY**

No. of Dams Paid For: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Receipt: \_\_\_\_\_

***INSPECTOR COMMENTS:***

Number of Dams Removed: \_\_\_\_\_ Date: \_\_\_\_\_

Number of Sticks Used: \_\_\_\_\_

Number of Fuses Used: \_\_\_\_\_

Invoice applicant for \_\_\_\_\_ dams.

\_\_\_\_\_  
INSPECTOR'S SIGNATURE

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.