

UINTAH COUNTY WEED DEPARTMENT HERBICIDE SPRAY UNIT COST-SHARE FORM

**PLEASE PRINT
LEGIBLY**

DATE

PARTICIPANTS NAME

MAILING ADDRESS

CITY

ST

ZIP

PHONE #1

PHONE #2

VENDOR NAME _____

SPRAY UNIT PURCHASE PRICE _____

SPRAY TANK CAPACITY (GAL) _____

ACRES OWNED OR CONTROLLED _____

PRIMARY LAND TYPE(S) OWNED WHERE
SPRAYER WILL LIKELY BE USED

NON-CROP INDUSTRIAL

CROPLAND OTHER _____

You may be eligible for a 25% reimbursement up to a maximum of \$100 every three (3) years. One reimbursement per household. Reimbursement requests must be submitted no later than the first (1st) Thursday of November. Requests must be returned to, Uintah County Weed Department, 364 South 1500 East, Vernal, UT 84078. Checks will be mailed on or before November 30.

I certify that I purchased a 3 gallon or larger herbicide spray unit within the current calendar year for private, non-commercial use for weed control on land that I own or control within Uintah County, Utah.

*Attach sales
receipt here*

PARTICIPANTS SIGNATURE

DATE

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