

# YELLOWSTONE COUNTY WEED DISTRICT

## HERBICIDE/BIOCONTROL COST SHARE PROGRAM APPLICATION

Please completely fill out this application and return it to the Yellowstone County Weed District Office, 3319 King Avenue East, Billings, Montana, 59101.

**BIOCONTROL USE.** A separate cost share application for biocontrol is required and must be filled out when landowner elects to incorporate both herbicide and biocontrol treatment to control noxious weeds.

Name of Landowner, Subdivision, or Group Representative:

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(Last Name) (First Name)

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(Address) (City) (State) (Zip)

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(Telephone)

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(Name and location of subdivision, if applicable)

Expected Date of Application: \_\_\_\_\_

Herbicide(s)/Biocontrol used: \_\_\_\_\_

Target Weed(s): \_\_\_\_\_

Approximate size or acreage of area to be treated: \_\_\_\_\_

Describe Area(s) to be treated. Please include the use of the land, such as pasture, subdivision lot, hayfield, lawn, native grasslands, etc. Please be specific on the location and provide a rough sketch of the area(s) being treated. The sketch should include waterways, sensitive areas and neighboring land uses. If applicable, please list all of the cooperating applicants:

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Sketch Area to be treated:



**RELEASE and INDEMNITY**

*The undersigned acknowledges that they have a legal and moral duty as the owner or occupier of land to control noxious weeds. They also recognize that control measures sometimes involve risks to desirable plants, animals and humans. In consideration of the benefit obtained by reducing the burden of their responsibility to control noxious weeds and in recognition of risks which may be encountered, the undersigned, on behalf of themselves, their agents, employees or contractors, hereby releases, holds harmless and shall indemnify and defend Yellowstone County, its agents and employees, from all loss, claims, costs and expenses, damages, lawsuits or judgments resulting from damage or destruction of property, personal injury or death of any person or persons in any manner arising from weed control activity in areas described in this Cost Share Program Application including, but not limited to, costs of suit and reasonable attorney fees.*

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(Applicant)

(Date)

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(Weed District Representative)

(Date)