

2024 DUST CONTROL AGREEMENT

Office use: Number _____
WELLS COUNTY HIGHWAY DEPARTMENT
828 E 200 S, Bluffton, IN 46714
Phone: (260) 824-6430
highway@wellscounty.org

Township: _____

Name _____

Address _____ City _____

Phone # _____

The undersigned, being a resident of Wells County, Indiana, has agreed to pay **\$2.07** per foot for application of DUST CONTROL in front of the residence for a distance of
(There is a minimum of 200 feet)

_____ feet x \$2.07 = \$ _____

Please choose one:

I will have the pink flags out by
Monday May 6, 2024

I would like the Highway Department to place the flags for me.
When application is mailed in with payment, the Highway Department will place flags.

****THIS IS YOUR RECEIPT, PLEASE READ.****

DUST CONTROL IS NOT YEAR ROUND. The County Highway Department will have **FULL** authority to maintain said road by **GRADING** or **adding stone** as needed at any time during the year. Participant agrees to pay in advance for said DUST CONTROL. **After November 1st, it is the Highway Superintendent's decision to grade through any or all dust control strips.**

If potholes appear in your DUST CONTROL strip it is **your** responsibility to maintain them. If strips are not properly taken care of, it will be the decision of the Wells County Highway Department to grade up the strips to provide proper road maintenance. There will be cold mix available to fill these holes. Cold mix is available for pick-up to current DUST CONTROL applicants at the Highway Garage.

THE WELLS COUNTY HIGHWAY DEPARTMENT IS NOT RESPONSIBLE FOR ANY DAMAGE TO VEHICLES AFFECTED BY THE DUST CONTROL MATERIAL USED ON THE ROADS AT THE TIME OF APPLICATION.

Signed _____

Date _____