

**APPLICATION FOR HERBICIDE TREATMENT OF AQUATIC VEGETATION  
BLACK WARRIOR & TOMBIGBEE RIVER LAKES  
U.S. Army Corps of Engineers, Mobile District**

**Applicant** (*Designated Agent*): \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**Telephone Numbers:** \_\_\_\_\_  
**Residence:** \_\_\_\_\_  
**Work:** \_\_\_\_\_  
**Other:** \_\_\_\_\_

**Permittees** (*Participants in Herbicide Treatment Permit. Add additional sheet if necessary*):

<b>Name</b>	<b>Address</b>	<b>Telephone Number</b>
_____	_____	_____
_____	_____	_____
_____	_____	_____
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_____	_____	_____
_____	_____	_____

**Treatment Area Location:** \_\_\_\_\_  
**Subdivision:** \_\_\_\_\_  
**Lot Number(s):** \_\_\_\_\_  
**Other:** \_\_\_\_\_

**Treatment Area Dimension an Size:** \_\_\_\_\_

**Target Plant Species:** \_\_\_\_\_

**Herbicide(s) to be Applied:** \_\_\_\_\_

1. This permit is issued by the undersigned authorized representative of the Black Warrior & Tombigbee River Lakes Project, Alabama, in accordance with the all applicable conditions set forth in the following conditions:
2. The permittee(s) agrees to and does hereby release and agree to save and hold the United States Government harmless from any and all causes of action, suits at law or equity of claims or demands or from any liability of any nature whatsoever for or on account of any injuries or damages to persons or property growing out of the execution of and activities under this permit.
3. The permittee(s) assumes full responsibility for any damage claims arising from such treatments. This includes replacement of or restitution for non-target vegetation, wildlife, or fish killed as a result of herbicide applications.
4. Herbicides classified as “general use” by the U.S. Environmental Protection Agency and designed for use on the target plant species may be utilized by non-licensed applicators. It is recommended that a licensed applicator be used.
5. If a “restricted use” herbicide(s) is used it must be applied by an applicator licensed by the state in the appropriate Aquatic Plant category. Applicators will be required to utilize application equipment that is capable of metering the herbicide as it is applied to assure proper application rate. Herbicides will be applied in accordance with all appropriate federal, state and local laws, rules and regulations.
6. The permittee(s) is responsible for posting water use restrictions in accordance with herbicide label instructions. Notice of these restrictions must be visible and legible within 150 feet of the treatment area.
7. The permittee(s) must assure others operating water withdrawal systems in the vicinity are notified prior to the herbicide applications. Required distances and restriction periods are listed on the herbicide label.
8. The Black Warrior & Tombigbee River Lakes Authorized Representative may terminate this permit at any time by giving written notice to the permittee(s). In the absence of any notice of termination, this permit will terminate 30 days from date of issuance.
9. The attached aquatic herbicide application record must be completed by the permittee and herbicide applicator and returned to the Project Office in order to receive a permit. *Mailing to: Demopolis Site Office, 384 Resource Management Dr., Demopolis, AL 36732; or Fax to: 334-289-3193*

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**Black Warrior & Tombigbee River Lakes Authorized Representative**

We, the undersigned parties,, hereby agree to abide by conditions and restrictions of this permit. We have read and understand the permit conditions and restrictions. We further agree to return the completed herbicide application permit to the Project Office within seven (7) days of completion of work. We hereby appoint \_\_\_\_\_

As our designated agent under this permit with full power and authority to act in each and all of our names and on each and all of our behalves in performing the activities authorized under this permit and in complying with the terms and conditions of this permit; however, we agree to remain each and all fully bound by the terms and conditions of this permit. The above instrument, together with all the terms and conditions thereof, is hereby accepted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

_____ Date	_____ Signature of Permittee/Designated Agent
_____ Date	_____ Signature of Permittee
_____ Date	_____ Signature of Permittee
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_____ Date	_____ Signature of Permittee

*(Participant Signatures in Herbicide Treatment Permit. Add additional sheet if necessary)*