REQUEST FOR PERMIT TO CONDUCT RIGHTS-OF-WAY SPRAYING

Request is hereby made, pursuant to Title 6 V.S.A., Chapter 87, and the regulations issued pursuant thereto, for an approved permit to conduct spraying on rights-of-way within the State of Vermont.

Gen	General Information			
1.	Title of Organization:	Vermont Agency of Transportation		
2.	Address:	One National Life Building Montpelier, Vt. 05633-5001		
3.	Telephone Number:	802 527-5448		
4.	Contact Person:	Craig Dusablon		
5.	Type of Right-of-Way:			
_	a. Electric Power Transmission Line b. Electric Power Distribution Line c. Telephone Line d. Highway e. Pipeline (Specify: Gas, Soil, Water) f. Railroad g. Airport Approaches and Safety Zones h. Other - Describe			
6.	Type of Treatment			
X	b. Stump Treatment c. Dormant Cane (Broadcast Basal) d. Soil Applications (Soil Sterilant) e. Ground Broadcast Stem-Foliage f. Stem Injection (Frill Treatment)			
7.	Railroad Right-of-Way Treatment			
	a. Ballast			
	b. Shoulder			

B. Site Specific Information

	1.	List Towns where Treatment will	be Made: State w	ide treatment.		
	2.	Total Acreage to be Treated	Total .	Acres: 900		
		Ground Application		Acres: 900		
	3.	Width of Right-of-Way		Feet: 50 to 500 feet		
	4.	Width of Area In Right-of-Way to	be Treated	Feet: 4 feet (Guardrail) varies on broadcasts		
	5.	Anticipated Starting Date: May 1	, 2013			
C.	Spe	Special Needs - Treatment Within Buffer Strips				
	1.	Specific Areas where Application Spot areas for Poison Ivy.	is to be Made:			
	2.	Type of Vegetation to be Controll Poison Ivy.	ed:			
	3.	Pesticide(s) to be Applied (List He Rodeo	ere and in Section	E):		
	4.	Rate of Application (List Here and in Section E):				
	5.	1.25 % or up to 4 quarts/acre.Application Technique to be Implemented:Hand held or truck mounted source with hand held applicator.				
	6.	Application Equipment to be Used: Hand held hose or back sprayer.				
	7.	Explain how this Request will Pro Aquatic labeled herbicide, low ra		eas, Sensitive Crops, Site Conditions, Wells, etc. on.		
D.	Cor	ntractor Information				
	1.	Contractor's Name:	Harry Williston	and Jeff Taylor		
	2.	Company Name:	Vegetation Contr	rol Services		

3. Company Address: 2342 Main Street Athol Mass. 01331

4. Current Vermont Applicator Certificate Number: 18-1-99 (r)

5. Company Telephone Number: 978 249-5348 978 249-4784 (fax)

E. Control Details

Pesticides to be used and rates to be applied. If more than one chemical is listed, a summary of the uses intended for each chemical must be provided. The summary should state whether the chemical will be mixed or applied separately, specifying which chemicals will control what types of vegetation. (Please Note: A copy of a label, MSDS sheet and EPA Fact Sheet [if available] must be supplied for each chemical to be used.)

Trade Name	Common Name of Active Ingredient(s)	EPA Reg. Number	Applic. Rate Product/Acr e	Vegetation to Be Controlled	Type of Application and Equipment to be Used
Garlon 4 ULTRA	Triclopyr	62719-527	1 to 1 ¼ gal.	Tree & Brush	Low volume basal & stump Broadcast,Backpack & Truck mounted.
Garlon 3 A	Triclopry	62719-37	2/3 gal.	Tree & Brush	Same
Oust Extra	Sulfometuron	352-622	4 ounces	Guardrail	Truck mounted
Escort	Metsulfuron	352-439	1/3 oz.	Turf	Truck mounted.
Krenite S	Fosamine	352-395	2 gal.	Tree & Brush	Truck Mounted & Back Pack. Truck mounted. Truck mounted & Back Back.
Rodeo	Glyphosate	62719-324	½ gal 1 gal.	Guardrail Brush & Poison Ivy	Truck mounted & Back Back.

F.	Methods	of Notification	

- 1. List the Newspapers in which you will Advertise this Application to Comply with Section IV, 4.b., of the Vermont Regulations for Control of Pesticides.
 - a) Attached Appendix B.

b)

2. Please Indicate Other Notification Option Chosen to Comply with Section IV, 4.c, of the Vermont Regulations for Control of Pesticides.

Radio Attached Appendix A.

- G. Other Information To Be Submitted With Application
 - 1. Two (2) Sets of Geodetic (in 7.5 minute scale) or Orthophoto Maps indicating the Right-of-Way to be Treated. (Only one set of maps is needed if maps have been previously submitted <u>and</u> revisions have <u>not</u> been made.) Submitted.
 - 2. Current Labelling for each Pesticide to be Used. Attached in Appendix C.
 - 3. Current Material Safety Data Sheet (MSDS) for each Pesticide to be Used. Attached.
 - 4. Current Environmental Protection Agency Pesticide Fact Sheet (if available). Attached.

The undersigned accepts full responsibility for all statutes and regulations of the State of Vermont and understands that any authorization is limited to the described materials, locations and time periods stated herein.

The undersigned further understands that weekly spray and dusting operations must be reported to the Vermont Agency of Agriculture. Such written report shall be on forms furnished by the Secretary of Agriculture and placed in the mail not later than the close of business on the Monday following the week's operation.

4-17-2013	Craig Dusablon
Date	Signature of Applicant

(NOTE: Additional sheets may be attached to include further information.)