

REQUEST FOR HARD SURFACE 2024 DUST CONTROL

Dust Control requests must be a minimum of 300 consecutive feet and a maximum of 2,640 consecutive feet. A group of neighbors may split the cost if desired, and are encouraged to submit their application as a group, if payment is presented in full. 5-Year County Financing may be available through the County Clerk for connected Hard Surface Dust Control installations, as defined within the current Gravel Road Dust Abatement policy. For all applications requesting financing, individual property owner must apply separately.

Any non-connected Hard Surface Dust Control will **not** receive future maintenance provided by the County and will require future maintenance to be paid for by the property owner. If roadways are not maintained, the roadway will be returned to gravel upon disrepair.

Dust Control is available on a first come, first serve basis. The 2024 program will be closed to requests after May 15, 2024 or after receiving registration of 6 total projects, whichever occurs first.

1 - INSTALLATION OF ASPHALT DUST CONTROL - **\$28.11 PER FOOT**

2 – MAINTENANCE NON-CONNECTED - **\$7.35 PER FOOT**: Applies to existing chip & seal dust control sections that are ineligible for County funded maintenance (non-connected Hard Surface Dust Control locations)

- One (1) application of road oil and one (1) application of Cover Material.

Please complete the bottom portion of this form and return it with your verification of financing, check or money order payable to Leavenworth County, 300 Walnut St., Leavenworth, KS 66048. Should you have any questions, please contact Public Works (913) 684-0470 or the County Shop at (913) 727-1800. You can obtain a form by coming to the Department of Public Works, calling an email request, emailing a request to publicworks@leavenworthcounty.gov or visiting www.leavenworthcounty.gov

DUST CONTROL PROGRAM REGISTRATION FORM

Please check one: Installation \$28.11 per foot Maintenance \$7.35 per foot

Applicant is Requesting Financing*

I UNDERSTAND THE WORK IS TEMPORARY IN NATURE AND THE EFFECTIVENESS OF THE DUST CONTROL METHOD IS NOT WARRANTED OR GURANTEED.

Name _____ Daytime Phone _____

Address _____ City _____ Zip _____

PID _____ Requested Road: _____

Lineal feet requested _____ (300-foot maximum) x \$ _____ (price per foot) = \$ _____ (Total Due)

PAYMENT IN FULL OR FINANCING REQUEST* MUST BE SUBMITTED WITH THIS REGISTRATION FORM

*Resident will be notified of approval by phone. If financing is denied, payment must be received in full within 14 days of notification or application will be removed from the program and reapplication will be required.

DATE RECEIVED STAMP	PUBLIC WORKS OFFICE USE ONLY Check#: _____ or Financed _____ PW Signature: _____ PW Printed Name: _____
CLERK'S OFFICE USE ONLY (IF FINANCED) I VERIFY THAT THERE ARE NO UNPAID/OUTSTANDING TAXES ASSOCIATED WITH THE REQUESTING PROPERTY: PID _____ Clerk's Office Signature: _____ Clerk's Office Printed Name: _____	