



**LAND USE PERMIT
LUP-CCV
Chemical Control of Vegetation
July 10, 2015**

Type or Print Clearly

Date: _____

To: _____ (District Roadside Manager)

VDOT District: _____

From: _____ (Permittee Name)

A request is hereby made for permission to chemically control certain vegetation at the following location(s):

Route Number(s): _____

In the City, County, Town of: _____

Type of Treatment: _____

Description of Work: _____

Herbicide(s) to be used:

Herbicide # 1: _____ Rate: _____

Herbicide # 2: _____ Rate: _____

Additional Herbicides and Rates: _____

Name of Licensed Applicator: _____

VDACS Pesticide License No.: _____ (Copy Attached)

SPECIAL PROVISIONS

1. If the type of treatment requested is for a cut stump, then herbicide shall be applied as a cut stump treatment only. No broadcast spraying shall occur.
2. Herbicide shall be applied only in accordance with the product label.
3. Only authorized vegetative material shall be affected by the application of herbicide.
4. Herbicides shall be handled and applied only by an individual licensed by the **Virginia Department of Agriculture and Consumer Services** (VDACS) as a Commercial Pesticide Applicator, Category 6.
5. A copy of the current MSDS and label(s) for each herbicide shall be attached to this request and be maintained on-site.
6. Performance of the requested activity shall be guaranteed by a surety bond, cash surety or irrevocable letter of credit attached to the VDOT Land Use Permit for which this activity is proposed.

REQUESTOR INFORMATION

Type or Print Clearly

Company Name: _____

Company Address: _____

Name of Contact Person: _____

Telephone No.: (____) _____ E-Mail Address: _____

By: _____ Title: _____

(Signature)

VDOT DETERMINATION

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_____ Insofar as the Commonwealth Transportation Board has the right and power to grant same, the above requestor is authorized to chemically control vegetation within state maintained rights-of-way as outlined herein and under the auspices of a VDOT Land Use Permit.

_____ The request to chemically control vegetation within state maintained rights-of-way is denied based on the reasoning outlined below.

By: _____ Date: _____

(District Roadside Manager)

Comments: _____

