

PUBLIC WORKS DEPARTMENT Operations Division

NO SPRAY REQUEST AND MAINTENANCE AGREEMENT

PLEASE PRINT		
Sign Location – Street Address:		
NAME		TEL (home)
ADDRESS		TEL (Work)
CITY	STATE	ZIP
Do you own the property? Yes No If you rent, please supply Owner's Name and Address:		
If new, additional or replacement signs are needed, please indicate quantity:		
As a property owner in the City of Shoreline, I understand that Shoreline will provide a Herbicide		
Vegetation Control Program to discourage undesirable brush growth and grass along the roadway shoulder.		
I understand that if I request the City not to spray adjacent to my property, then it becomes my responsibility to maintain the vegetation along said right-of-way. I further understand if I do not maintain the vegetation, this agreement becomes null and void and said right-of-way will be returned to the Herbicide Vegetation Control Program.		
Therefore:		

- 1. I request that the City of Shoreline delete chemical herbicide spraying at the location indicated above.
- 2. I agree to post "Owner Will Maintain" signs on the borders of my property so the signs will be clearly visible from the driving lane.
- 3. I agree to control undesirable vegetation, including alder, willow, blackberry, and tansy

ragwort, within the road right-of-way so traffic visibility is not hindered and the vegetation does not encroach into the roadway surface.

- 4. I agree to keep the gravel shoulders clear of all vegetation to a minimum distance of 3' from the pavement edge. Vegetation growing on gravel shoulders from 3' from pavement edge to 8' from the pavement edge will be kept mowed to a height not exceeding 6 inches.
- 5. I hereby accept the responsibility to install and maintain the "Owner Will Maintain" signs in the manner and at the location as set forth in this agreement. I further agree my performance under this agreement is at my sole risk and I shall indemnify the City of Shoreline, it's agents and employees, and hold them harmless from any and all liability for damages, costs, and expenses resulting from, arising out of, or in any way connected with this agreement, or from my failure to perform fully thereunder. I further agree to defend the City of Shoreline, it's agents and employees, against all suits, actions, or proceedings brought by any third party against them for which I would be liable thereunder.

Signature of Owner/Occupant

Date _____

Return To:

City of Shoreline Operations Division 17544 Midvale Ave N Shoreline WA. 98133