



Pend Oreille County Weed Board

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www.pendoreilleco.org/your-government/noxious-weed-department/

Aquatic Neighborhood Cooperative Weed Management 2020 Application for Cost-Share Assistance

In order to promote increased landowner involvement in controlling noxious weeds, the Pend Oreille County Noxious Weed Control Board & Pend Oreille Public Utility District is offering the Aquatic Neighborhood Cost Share Program for 2020. Individuals and Neighborhood groups have some options under an Integrated Weed Management program to implement noxious weed control on their properties.

YOUR RULES

- ★ **All groups must apply regardless of having participated in previous years.**
- ★ Please establish a group leader and include contact information on the application.
- ★ Please call to confirm we accepted your application.
- ★ Past participants who have **NOT** turned in their work report must do so to be eligible, even if no work was performed.
- ★ Take “**before**” and “**after**” pictures, using a fixed **photo point**, of weed management activity areas and turn in with **work report**.
- ★ Work reports must be turned in with an original receipt for applicants who have been approved for reimbursement.

OUR RULES

- ★ **All applications are processed on a first come, first served basis until funds are expended.**
- ★ We have equipment that you can rent, such as a weed ray and a beach roller.
- ★ Reimbursements for products or services purchased for weed management are capped at \$500 for an individual applicant and \$1000 per group of 2 or more landowners.
- ★ Reimbursed management activities include hiring a contractor to do weed control (no herbicide treatments) or purchasing weed control tools or equipment. Original receipts are required.

THE GROUP LEADER

- ★ Is responsible for turning in all forms and original receipts on or before the work report deadline (October 2nd).
- ★ Is responsible for distributing group funds
- ★ Completes the application and returns it to the Weed Board (first come, first served).
- ★ Turns in **WORK REPORTS** no later than October 2, 2020. Failure to turn in work reports will affect reimbursement and future participation eligibility.

"The Pend Oreille County Weed Board is an equal opportunity provider."

Neighborhood Cost Share Program Application Form 2020

Name of Neighborhood Group _____
(if none selected the group leaders last name will become the Group name)

Print Name, Mailing, Site Address and parcel number of Leader & Members:

1. Group leader: _____ Phone number _____

E-mail address: _____ Parcel # _____

Mailing Address: _____

City _____ State _____ Zip _____

Site Address: _____

2. _____ Phone number _____

_____ Parcel # _____

3. _____ Phone number _____

_____ Parcel # _____

Signature of Leader: _____ Date: _____

Check appropriate box/boxes for area of assistance you or your group plans on using:

- Hiring a contractor
- Purchasing equipment
- Renting equipment from Weed Board Office (NOT REIMBURESED)

Brief description of work to be performed and approximate size of area for each member's property and weed or weeds to be controlled:

1. _____

2. _____

3. _____

Attach another sheet if more room is necessary

For office use only

Aquatic Allotted \$ _____

POR LK

HC \$ _____ expended M/EQ \$ _____ expended