

Fax: 306-787-0780

WSAScienceandLicensingStandards@wsask.ca

Application for Permit: Chemical Control of Aquatic Nuisances in and/or Near Surface Water

In accordance with Clause 7(1)(b) of <u>The Environmental Management and Protection (General) Regulations</u> a permit is required if pesticides are to be applied to any surface watercourse in Saskatchewan. This includes intermittent waterways and drainage ditches, even when dry, and areas up to 50 metres from the water's edge. The only exceptions are non-draining waterbodies, such as dugouts, which are wholly contained on private land. To be exempt, such waterbodies must not discharge surface water, at any time, to adjacent properties or waterways. I hereby apply for a permit*.

1.	Name of Applicator: Applicator's Licence #:			
			Telephone:	
2.	Chemical to be applied on behalf of:			
3.	Purpose of treatment: [] Algae [] Emergent Plants (e.g. Cattails) [] Submergent Plants	[] Insects (specify) _	(person or agency)	
4.	Chemical** to be used (product name and product registration #):			
5.	Dosage Rate:			
6.	Size of area to be treated:	Average	depth:	
7.	Total amount of chemical to be applied:			
8.	Number of times chemical to be applied:			
	Method of chemical to be applied by:			
10	10. Period of treatment: to			
11.	1. Name or location and description of water body to be treated (attach a sketch plan):			
12.	List major water users (including fish/wildlife) that may be affected:			
16	 I agree to follow the instructions outlined by the manufacturer with specific reference to the rate of application, concentration of the chemical applied and safety factors relating to the application. I understand and agree that any permit granted is valid only within the calendar year of issue unless otherwise stated on the permit and is subject to cancellation at any time at the ministry's discretion In consideration of the granting to me of a permit to apply chemicals, I hereby undertake to save harmless and agree to indemnify the Province of Saskatchewan, its officers and employees from ar against all damages, losses, costs, charges and expenses which the province, its officers and emplo may sustain or incur or be liable for in consequence of such claims or demands or of its having grato me a permit to apply chemicals. I certify that the information contained in this application is true, complete and accurate. 			
Signature of Applicant:			Date:	
Wa	lly complete above and submit to: ater Security Agency 0 - 2365 Albert Street REGINA SK S4P 4K1	Office Use Permit Granted:	Only	

Permit No.:

Please allow approximately 20 working days for processing.
 Only one chemical per permit. This form may be photocopied.