

Edson Snow Dump Agreement

SNOW DUMP USE AGREEMENT AND REGISTRATION

Use of the Town of Edson Snow Dump by outside parties is conditional. Town of Edson will permit access using an administered lock system. Codes will be provided to Contractors that agree to the terms of use of the facility.

By submitting this application, the Contractor agrees that:

- 1.) The Contractors and its staff will follow the Code of Practice: Snow Dump for the facility and seek clarification as necessary.
- 2.) Access to the facility will only be granted during weekday working hours between 8:00 am to 16:00 pm on Monday through Friday.
- 3.) The Contractor will maintain Commercial General Liability Insurance of not less than one million dollars (\$1,000,000) per occurrence including sudden and accidental environmental liability endorsement. The Town is to be listed as an additional insured on the policy and a copy of the insurance certificate will be provided to the Town.
- 4.) Contractor will maintain WCB coverage for its staff and provide proof of coverage to the Town.
- 5.) The Contractor report any unsafe act, condition, incident, spill, or release to the Town at 780-723-6461 and cooperate with any necessary investigations.
- 6.) The Contractor will not share their code with another firm or entity that has not been authorized for use.
- 7.) The Contractor understands that access to the facility is logged and that the Town may also record vehicle traffic with a video surveillance system.
- 8.) The Contractor will return the key to the Town at the end of winter season (March 31, 2021) to receive their deposit back.
- 9.) The Town may impose a user fee on the snow dump later. Town will provide notice of the amount and timing of the user fee to the Contractor before implementation.
- 10.) The town may restrict access if there is any evidence of misuse, contamination, or damage to the facility.

By signing and submitting this form Contractor agrees to the above

Submitted By:

PRINT NAME

Signed:

SIGNATURE

Date:

YYYY-MM-DD

APPLICANT INFORMATION

Contact Name:

E-mail:

Phone:

Cell Phone:

Business Name:

Address:

Business License No.:

Business Phone:

What size of load will be hauled by your company? Please indicate if there will be multiple vehicles

(A) **Semi Trailer** Yes No

(B) **Landscaping Trailer** Yes No

(C) **Dump Truck** Yes No

(D) **OTHER**, please specify:

Vehicle List: (Include Model and License Plate Number)

OFFICE USE ONLY

Approved by: _____

Key No.: _____

Authorization Signature: _____

Date: _____

**RULES AND REGULATION OF THE ESON SNOW DUMP ARE SUBJECT TO CHANGE AND THE ADMINISTRATOR MUST GIVE IMMEDIATE NOTICE TO ALL APPLIANTS TO ENSURE SAFETY OF ALL CONTRACTORS AND EMPLOYEES.*