

Jefferson County Weed District
PO Box H
Boulder, MT 596332
406) 225-4165
jallen@jeffersoncounty-mt.gov



Spray Equipment Rental Agreement

Property Owners/Leases

Name _____

Physical Address _____

Mailing

Address _____

RELEASE and INDEMNITY

The undersigned acknowledges that they have a legal and moral duty as the owner/occupier of land to control noxious weeds. They also recognize that control measures sometimes involve risks to desirable plants, animals and humans in consideration of the benefit obtained by reducing the burden of their responsibility to control noxious weeds and in recognition of risks which may be encountered. The undersigned hereby releases, holds harmless and shall indemnify and defend Jefferson County, its agents and employees, from any and all liability and causes of action, anticipated or unforeseen, which may arise from weed control activity in the _____ part of Section _____,

Township _____, Range _____, P.M.M.

Dated: _____, 20 _____

Owner/Occupier

Type of Activity

SEE REVERSE SIDE FOR LENDING AGREEMENT

SPRAYER LENDING AGREEMENT

Date Out: _____

Date In: _____

Time Out: _____

Time In: _____

I, the borrower of the Jefferson County Weed District Sprayer equipment, hereby agree to the following policies:

- 1) That I am responsible for the maintenance and replacement of any damage occurred while in my care. Replacement of the unit or any parts will be charged at the same cost to the Weed District office for purchase.
- 2) That I will return the spraying unit within _____ day(s). Backpacks are \$5.00 per day. Cost of the 55 gallon or ATV sprayer is \$25.00/day. Cost of the 200 gallon tank/trailer unit is \$60.00 per day. Use of the tank trailer requires a \$200 damage deposit; deposit fee will be refunded in full if unit is returned in the condition it was rented.
- 3) Engine fuel tank will be returned full of at least 85.5 octane gasoline or an additional charge of \$5 will be levied.
- 4) If the weather is deterrent, I the borrower will contact the Weed District office @ (406) 225-4165 personally to make further arrangements.
- 5) I have presented proof of coverage for auto liability associated with the movement of the trailer and I acknowledge use of the trailer will alter the handling and stopping distances of the towing vehicle, that chemical in the tank may slosh during movement and make control difficult and that I will adjust my driving to reflect such hazards. I assume full responsibility for the use and movement of the trailer.

Printed Name of Borrower

Address

Signature of Borrower

Phone Number

UNIT BORROWED

Backpack Sprayer No. _____

ATV Sprayer No. _____

Portable Slide-In Sprayer No. _____

Days Used _____

Repairs Due _____

Amount Due _____

PLEASE WASH OUT SPRAYER AFTER EACH USE WITH HOUSEHOLD AMMONIA

SEE REVERSE SIDE FOR RELEASE FORM