



# Invasive Plant Management Landowner Assistance Program Application Form

First and Last Name:

Street Address:

Email Address:

Phone Number:

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Landowner Assistance Program Service

\*Eligible for one of these services per year

†Eligible one time only for service

- Herbicide Dispensing\*
- One-Time Private Property Treatment\* †
- Property Assessment and Plant ID
- Biological Control Agents\*
- Equipment Loan Out
  - Truck Tank
  - ATV Tank
  - Backpack

Size of Property (Acres):

Invasive Plant Species to Control

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General Use of Land Where Invasive is Present

- |                                  |                                       |
|----------------------------------|---------------------------------------|
| <input type="checkbox"/> Lawn    | <input type="checkbox"/> Treed Area   |
| <input type="checkbox"/> Yard    | <input type="checkbox"/> Near Water   |
| <input type="checkbox"/> Pasture | <input type="checkbox"/> Other: _____ |