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| **INSTRUCTIONS:** Submit completed form to the Department of Highways District Office for the county in which the requestor resides. District office information can be accessed at the link below: <https://transportation.ky.gov/DistrictPages>  |
| **SECTION 1: REQUESTER INFORMATION** |
| **FIRST NAME**      | **LAST NAME**      | **PHONE**      |
| **ADDRESS**      | **CITY**      | **STATE**      | **ZIP**      |
| **SECTION 2: NOXIOUS WEED SELECTION**  |
| Indicate the noxious weed(s) for which eradication is requested. (*Check all that apply*.)  |
|  | [ ]  |  Amur Honeysuckle |  | [ ]  |  Kudzu |  |  |  |  |  |  |  |  |  |  |
|  | [ ]  |  Canada Thistle |  | [ ]  |  Marestail |  |  |  |  |  |  |  |  |  |  |
|  | [ ]  |  Common Teasel |  | [ ]  |  Multiflora Rose |  |  |  |  |  |  |  |  |  |  |
|  | [ ]  |  Giant Foxtail |  | [ ]  |  Musk or Nodding Thistle |  |  |  |  |  |  |  |  |  |  |
|  | [ ]  |  Japanese Knotweed |  | [ ]  |  Poison Hemlock |  |  |  |  |  |  |  |  |  |  |
|  | [ ]  |  Johnsongrass |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **SECTION 3: REQUEST** |
| I, |       |  , hereby request that the Department of Highways take measures to control |  |
|  | *(first name, last name)* |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| the weed(s) indicated above that have been declared noxious by the State of Kentucky under Statute Number 176.051. |
| I | own property in |       | County, which is adjacent to State Route |       |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| located between milepoints |       | and |       | . I also understand that to be eligible for this program I must be  |  |
| engaged in a weed control practice of one or more of the above noted weeds on my property, which is located adjacent |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| to the stated right-of-way. |  |
|  |  |  |  |  |  |  |       |  |  |  |  |
|  | **SIGNATURE** |  |  |  |  |  | **DATE** |  |  |  |  |
|  | **KYTC USE ONLY** |  |
| Request approved [ ]   |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Request denied [ ]  |  | Reason for denial: |       |  |  |
|  |  |  |       |  |
|  | **SIGNATURE** | **DATE** |  |

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