



HAMPTON TOWNSHIP RESIDENTS
EMAIL ADDRESS: clerk@hamptontwp.com

Hampton Township is offering all residents who live on a township gravel road the opportunity to participate in a cost sharing dust control program. The township will arrange to have chloride applied to the portion of roadway in front of the resident's house in late spring/early summer, and pay for approximately half the cost of the chloride application, up to a maximum roadway length of 400 feet. The resident will be required to pay a fee of \$45 per 100 feet. Residents requesting more than 400 feet of chloride application will be responsible to pay \$180 for the first 400 feet and 100% of the cost for additional footage which is \$90 per 100 feet.

Please note that Hampton Township reserves the right to maintain the road whenever needed to accommodate the traveling public.

Please submit your check to Hampton Township no **later than Wednesday May 7, 2025** if you are interested in the program.

Please make check payable to: Hampton Township

Mail your check and completed application form to: Hampton Township
P.O. Box 154
Hampton, MN 55031

TO ENSURE CORRECT APPLICATION, THE RESIDENT IS RESPONSIBLE FOR THE FOLLOWING:

- 1. Mark footage start & stop with highly visible stakes by Friday May 23, 2025
- 2. Have residence clearly marked with correct street address number

Please cut on line and send in with check.

Application for 2025 Dust Control Program

Name: of Applicant _____
Street Address _____
Phone Number _____

(by providing your phone number you are giving permission to share it with the applicator in case they have questions)

I request to have liquid Chloride applied 18 feet by:

___300 feet (\$135.00 for resident) ___400 feet (\$180.00 for resident) ____ Stated Amount (\$90.00 per 100 ft over 400 ft)

TOTAL DUE BY RESIDENT _____ Date Paid _____
TOTAL DUE BY TOWNSHIP _____ Check # _____

I understand that Hampton Township reserves the right to maintain the road whenever it seems necessary for the convenience/comfort of the traveling public.

Signature of Applicant

Date