

Sheridan County Weed & Pest Control District
2667 Aero Loop
Sheridan, WY 82801
(307)-672-3740

Landowner Permission For Chemical Pick Up

Date: _____

I _____ (landowner/lease holder), hereby grant permission for _____ (individual picking up chemical) to sign for and pick up the following amounts of herbicides and/or pesticides from the Sheridan County Weed & Pest Control District in Sheridan, WY. I understand I will receive a mailed invoice for the product.

CHEMICAL	AMOUNT

END DATE

- Upon pickup
- End of season
- No end date
- Other (specify) _____

I further agree to pay for the herbicides and/or pesticides picked up.

****All information is required***

Print Name: _____

Mailing Address: _____

Phone Number: _____

Acres Owned/Leased: _____

Signature: _____