



**MD of Pincher Creek No.9
Agreement to Purchase Services**



GRAVEL PURCHASE

Landowner Name	Mailing Address	Phone	Email

Hereinafter called the APPLICANT(S) and the MD of Pincher Creek, hereinafter referred to as the MD, the APPLICANT(S) do hereby request to purchase gravel from the MD as outlined below:

Legal Land Description	Civic Address	Stockpile	Estimated Quantity of Gravel

In consideration of the mutual covenants contained in this AGREEMENT, THE PARTIES AGREE AS FOLLOWS:

1. You are requesting to purchase gravel from the MD and agree that you will be personally held responsible for the cost of such material, and any unpaid costs could be transferred to your property tax account. The applicant agrees to pay the Municipality a charge as per Policy C-FIN-529 Fees and Charges (which states a cost of \$13.00 per cubic yard for $\frac{3}{4}$ crushed gravel/\$8.00 per cubic yard for pit run gravel)
2. You will be responsible for the hauling, and the trucking company will bill you directly.
3. Someone will need to be present for delivery.
4. By signing this document, you hold harmless and indemnify the MD from all liability for injury, death, property damage, property loss, or any other loss or expense to any party, including any other financial loss or expense, including, without restriction. Legal expenses and costs on a solicitor-and-his-own-client full indemnity basis as a result of the MD supplying materials or services.

I acknowledge that I have read, had the opportunity to ask questions and clarifications before signing, and understand this entire application form. I agree to be legally bound by it.

Date:	
Landowner Signature	
MD Witness Signature	

****office use only***

Issued for Service Date:	
Actual Quantity Delivered:	
Landowner Signature for Change in Quantity:	
Date Work Completed:	
Operator Signoff:	

This personal information is being collected under the authority of the MD of Pincher Creek No. 9 as it directly relates to and is necessary for operating a program or activity of the MD. This collection is authorized by section 4 of the Protection and Privacy Act. For questions about the collection of personal information, contact the Privacy Officer at 403-627-3130, MD Box 279, Pincher Creek, Alberta T0K 1W0 / 1037 Herron Ave / P 403-627-3130 / F 403-627-5070 / info@mdpincer creek.ab.ca.