



## Municipal District of Wainwright No.61 Ratepayer Gravel Request

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

PHONE NUMBER(S): \_\_\_\_\_

LAND LOCATION: \_\_\_\_\_ DIVISION: \_\_\_\_\_

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**PURCHASED GRAVEL**  TYPE OF GRAVEL:  ¾"  1 ½"

AMOUNT: \_\_\_\_\_ MT

PRICE QUOTED: \_\_\_\_\_

DELIVERY INSTRUCTIONS: \_\_\_\_\_

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**Office Use Only:**

REQUEST TAKEN BY: \_\_\_\_\_

HOLD BLAMELESS FORM:  YES  NO

IF NO HOLD BLAMELESS IS SIGNED, DATE SIGNED: \_\_\_\_\_

ENTERED INTO GRAVEL REQUEST SPEADSHEET BY: \_\_\_\_\_

DATE: \_\_\_\_\_