

2026 DAHLGREN TOWNSHIP DUST CONTROL FORM

Name _____

Address(es) Requiring Dust Control _____

City _____ Phone(s) _____

Length of Area to be Treated _____ feet X \$1.10 = \$ _____ amount due.

Please contact the Clerk (clerk@dahlgrentownship.com) if you want to know how many feet you had in 2025.

Comments:

E-mail address / phone number for 2nd application notification:

Please include this completed form with your check made payable to Dahlgren Township by May 15, 2026. Send completed form and check to:

Dahlgren Township
Attn: Mary Olson, Clerk
6970 Inwood Road
Cologne, MN 55322

If you plan to split the costs equally with your neighbors, please assign one person to collect payment and submit to the Township in one envelope.