



PAVEMENT SEALANT APPLICATOR REGISTRATION APPLICATION

Company or Organization Name: _____

Address: _____

Phone: _____ E-Mail: _____

Applicant Name: _____

Address: _____

Phone: _____ E-Mail: _____

Name, Address and phone numbers of all individuals applying sealant - you may attach a list.

Type of sealant being provided by your company (include PAH content and CAS numbers):

By signing below, I hereby affirm that I will not, nor will any person acting under my license, apply products that contain coal tar, coal tar derivatives, or coal tar mixtures ("Coal Tar Products"), nor will I apply any sealant mixture with a PAH content of greater than .1%, by weight to any public or private property within the City of Dexter. (The use of Coal Tar Products is strictly prohibited in the City of Dexter per Ordinance #2016-24 and is punishable by a fine of up to \$10,000 or a 90 day sentence per offense.)

Applicant's Signature

Date

Staff Review: Date Received: _____ Receipt # _____

Fee: \$250 (through December 31 of the current year)

Approved Denied Reviewed by: _____

Expiration Date: December 31, _____

Reasons for Denial (if applicable): _____

Received identification, any required licenses, and proof of insurance? _____ (Y/N)

APPROVAL STAMP