



RM of Marquis No. 191

13 Main St  
Box 30  
Marquis, SK, S0H 2X0  
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E: rm191@sasktel.net

## CUSTOM WORK AGREEMENT FORM

Date of Request: \_\_\_\_\_  
(mm/dd/yyyy)

### APPLICANT INFORMATION

Name	
Mailing Address	
City & Postal Code	
Phone Number	
Email Address	
Fax Number	

### CUSTOM WORK REQUIRED

Please provide a detailed explanation for the work requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>PROPERTY INFORMATION</b>
<i>Please indicate the legal land location of where the work is required:</i>
Quarter _____ Section _____ Township _____ Range _____ Meridian <u>W2</u> <small>(NE, NW, SE, SW) (1 to 36) (19 - 21) (25 - 29)</small>
<b>OR</b>
<i>Registered Plan Number as Described at the Land Titles Registry:</i>
Lot _____ Block _____ Plan _____

I hereby make application and authorize the RM of Marquis No. 191 to perform custom work on my behalf. I agree to indemnify and save harmless the Municipality of any and all damages to my property. I agree that I am responsible to ensure utility locates are completed, if required, in order for the work to be done. **I further understand that the work will only be performed when the equipment is in the area and when time permits.**

I agree to pay to the RM of Marquis No. 191 for the custom work requested at the current rates as set by Council annually. In the event that the charges for custom work completed are not paid within thirty days of the billing date and remain unpaid at year end, any unpaid charges will be added to and form a part of the taxes on my property. The Municipality may refuse services for delinquent accounts.

Witness Signature: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

### TO BE COMPLETED BY OPERATOR ONLY

Grader	_____ Hours	Truck & Man	_____ Hours
Tractor & Front End Loader	_____ Hours	Hired Hand	_____ Hours
Dust Control	_____ Bags		

Date(s) Work Completed: \_\_\_\_\_

Additional Comments: \_\_\_\_\_