

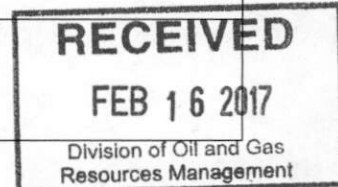


Surface Application Annual Report Form 15 Rev. 01/17

For calendar year ending
 31-Dec-2016

I. Name of entity that owns or has a legal right or obligation to maintain road:

| | | | |
|----------------------------|---------------------|------------------------------------|----------|
| Name: | Hartford Township | County: | Licking |
| Street Address: | P.O.Box 203 | Township/ Municipality: | Hartford |
| City / State / Zip: | Croton / OH / 43013 | Other | |
| Phone: | (740) 404-3610 | | |



II. Application Points

*EXAMPLE: Clark County – Wayne Township – Township Road 144 between
 Township Road 166 and David Road*

| | | Quantities (BBL) | Dates of Application |
|----|----|-----------------------------|---------------------------------|
| 1) | NA | 0 | NA |
| 2) | | | |
| 3) | | | |
| 4) | | | |
| 5) | | | |
| 6) | | | |
| 7) | | | |
| 8) | | | |

III. Brine Haulers

| | Name | Registration Number |
|----|-------------|----------------------------|
| 1) | | |
| 2) | | |
| 3) | | |
| 4) | | |
| 5) | | |

IV. Sources

| Permit Number | Well Owner Name | County | Township | Quantities (BBL) |
|----------------------|------------------------|---------------|-----------------|-----------------------------|
| | | | | |
| | | | | |

0 BBL

| Permit Number | Well Owner Name | County | Township | Quantities (BBL) |
|---------------|-----------------|--------|----------|---------------------|
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INSTRUCTIONS

- Item I* Required. The name must be supplied by the person(s), company or government unit that is responsible for the maintenance of the road(s) to which brine has been applied.
- Item II* Include county, township, and actual point of application of brine. A barrel (BBL) equals 42 U.S. gallons.
- Item III* Hauler's Name and Registration Number must be listed if a hauler delivered or applied brine. If the county, township, or municipality used its own vehicles to apply brine, a Registration Number is not needed.
- Item IV* Supply requested information for each point from which brine was collected and eventually used for surface application.

Additional copies of this form may be attached if necessary.

 PRINT NAME

 PRINT TITLE

 SIGNATURE OF OWNER/AUTHORIZED AGENT

 DATE SIGNED

Brown, Michael

From: ullom@hartfordtownship.net
Sent: Wednesday, February 15, 2017 6:27 PM
To: Brown, Michael
Subject: Hartford Township brine report
Attachments: SurfaceApplicationAnnualReportForm15.docx

Mr. Brown,

Attached is Hartford Township, Licking County's brine application report. The form would not allow me to put the year in at the top.

We did use brine this year.

Mike Ullom

Hartford Fiscal Officer

740-404-3610