



MUNICIPAL DISTRICT OF GREENVIEW

Log Haul Route Request on Greenview Roads
(e-mail completed form to patricia.biggin@mdgreenview.ab.ca)

Date:
Company Name:
Company Contact Name:
Contact Phone Number:
Company Address:
Office Phone Number:
E-Mail Address:
Greenview road(s) utilized - including roads coming off and direction turning onto the road(s):
Number of kilometres to be travelled:
Site Land Location of Log Harvest:
Number of Loads:
Start Date:
End Date:

Please attach a detailed map, labelling the roads to be travelled on, the direction turning onto the road(s) to get to the destination, the road(s) coming off and a marker indicating the site location.