



**POTTER COUNTY
CONSERVATION DISTRICT**

Invasive Plant Management Program Access Agreement

I, _____ (PROPERTY OWNER), give permission for the Potter County Conservation District and its representatives to access my property for the sole purposes of management and monitoring of invasive plants or other invasive species. This involves seasonal, small-scale spraying, and/or manual removal or pulling, and/or monitoring, documenting, photographing, and mapping invasive plant and insect locations as needed. I understand that this program will help protect the native species and natural resources of Potter County.

Name of Property Owner: _____

Mailing Address: _____

Email Address and/or Telephone Number: _____

Suspected Invasive Species on my property: _____

LANDOWNER SIGNATURE:

Date:

PCCD REPRESENTATIVE SIGNATURE:

Date:

PLEASE RETURN TO:

Potter County Conservation District

107 Market Street, Coudersport, PA 16915

Contact us at 814-274-8411 ext. 4 with any questions