

<b>ROUTE</b>	<b>SECTION</b>	<b>COUNTY</b>	<b>TOTAL SHEETS</b>	<b>SHEET NUMBER</b>
VARIOUS	2011-202-I	VARIOUS	6	4



**Illinois Department of Transportation**

Contract Number: \_\_\_\_\_  
 Weed Control Work Order #: \_\_\_\_\_  
 Route: \_\_\_\_\_

**CONTRACT 60R40**

Standard 30-day application  Specialized 10-day spot spray

Cook	DuPage	Kane	Work Order Prepared By	Team Section
Lake	McHenry	Will		

**Location:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Refer to attached Weed Control maps, which are hereby made a part of this work order ( \_\_\_\_\_ sheets)

<b>WORK INCLUDED IN THIS WORK ORDER</b>			
Item	Est. Map Qty.	Priority Multiplier	Est. Work Order Qty.
Weed Control, Aquatic	acres gallons		acres gallons
Weed Control, Teasel	acres gallons		acres gallons
Weed Control, Selective	acres gallons		acres gallons
Weed Control, Native Grass Restoration	acres gallons		acres gallons
Weed Control, Basal Treatment	acres gallons		acres gallons
Weed Control, Total Vegetation	acres gallons		acres gallons
Weed Control, Native Landscape Enhancement	acres		acres

**AUTHORIZATION OF WORK ORDER**

Resident Engineer/Technician Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

Contractor Signature (to acknowledge receipt) \_\_\_\_\_ Date/Time \_\_\_\_\_

**APPROVED PERSONNEL (RE USE ONLY)**

Name	License Number
_____	_____
_____	_____
_____	_____

**CERTIFICATION OF COMPLETION**

Contractor Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

**ACCEPTANCE OF COMPLETED WORK**

Resident Engineer/Technician Signature \_\_\_\_\_ Date/Time \_\_\_\_\_

ILLINOIS DEPARTMENT OF TRANSPORTATION

**WEED CONTROL**

**SAMPLE WORK ORDER**