



Buckthorn Pick Up Program Application

DEADLINE: **July 31**

Please email, mail, fax or drop off to: Caleb Ashling, City of Burnsville, 13713 Frontier Court, Burnsville, MN 55337 Email: caleb.ashling@burnsvillemn.gov Fax: 952-895-4531

1. Select your program option (select one):

LARGE LOT PICK UP

To qualify, property must have at least 1/3 acre of woods with mature buckthorn. You may apply as an individual or with other adjacent property owners.

NEIGHBORHOOD PICK UP*

Requires a minimum of three households to participate, but no set minimum for property size.

**If choosing this program, please indicate below the property type and number of participants:*

Single Family Homes

Number of homes: _____

Townhome/condo complex

Number of units: _____

2. Contact Information

Neighborhood Pick Up applications must include a lead applicant, who will coordinate with the City and disseminate information to co-applicants.

Lead Applicant Name: _____

Organization (if applicable): _____

Address: _____

Phone: _____

E-mail: _____

Before filling out the rest of this application, please review the information provided on the City webpage (www.burnsville.org/buckthorn) on recommended buckthorn control methods.

3. Project Description

- a) Please describe the type of equipment (such as hand saw, chainsaw, loppers, etc.) that your group has available for removing buckthorn:

- b) Treating cut buckthorn stumps with herbicide is absolutely necessary to prevent rapid and dense resprouting from the cut stumps. Please describe what type of herbicide your group plans on using and the herbicide application method (spray bottle, paint brush, etc.)

- c) After initial buckthorn removal, some buckthorn will sprout from seeds within the seed bank in the years to come and controlling buckthorn is a multi-year project. Please describe your neighborhood's plan to control buckthorn in the following years.

- d) If part of your buckthorn removal area will be occurring on sloped ground, there may be potential for increased erosion after buckthorn removal. If applicable, please describe your group's plan for reducing erosion.

- e) Depending on your site, it may be advisable for your group to purchase and plant native forest seeds or plugs in areas where buckthorn is removed, to help reduce the likelihood that the buckthorn will reestablish. Will this be a part of your neighborhood's long term management plan? *(FYI- Native trees are available at a discounted price for this purpose at the City's annual Tree Sale in April. Native forbs and grasses are available at the City's annual Native Plant Market in late May.)*

4. Signatures

I certify that I have agreed to participate in the City's Buckthorn Pick Up Program by removing and stacking buckthorn brush for pickup by the City, on a schedule to be determined by City staff and Lead Applicant.

Name of Lead Applicant

Signature

Date

SIGNATURES OF CO-APPLICANTS

Name of Property Owner

Address

Signature

Date

Name of Property Owner

Address

Signature

Date

Name of Property Owner

Address

Signature

Date

Name of Property Owner

Address

Signature

Date

Name of Property Owner

Address

Signature

Date

If needed, please use back of page to list additional co-applicants.