



Derek Fullerton, RS, CHO  
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**Board of Health**  
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## Property Exclusion from Pesticides

Date:

Please exclude the following property from mosquito control activities this year:

Resident name:  
Address:  
Town:  
Telephone number:

Property owner (if different):  
Address of owner:  
Town:

Types of mosquito control applications to be excluded:  
 Adulthooding  
 Larviciding

This form must be submitted by certified letter dated between January 1 and March 1, of the year the exclusion is requested, to the Town Clerk in the town in which the property exists. The exclusion will run from April 1 of that year to March 31 of the following year.