



# CITY OF MONTROSE MOSQUITO ABATEMENT

## 2021 PROPERTY INSPECTION & TREATMENT FORM

Complete this form and email to Rose Pest Solutions at [mosquito@rosepest.com](mailto:mosquito@rosepest.com). If there are any questions, contact Rose Pest Solutions at either: 810-238-3071, or [mosquito@rosepest.com](mailto:mosquito@rosepest.com).

DATE _____	
NAME _____	
ADDRESS _____	
HOME PHONE _____	CELL PHONE _____
EMAIL _____	
<p>Yes, I would like to participate in the 2021 City of Montrose Mosquito Abatement Program.</p> <p>____ Please contact me to schedule an appointment.</p> <p>____ No appointment is necessary, please include me in your city schedule.</p>	
I give Rose Pest Solutions permission to enter my property if I am not home: ____ Yes ____ No	
I give permission to have larvicide/pesticide applied to my property if necessary: ____ Yes ____ No	
Do you have an outside pet? ____ Yes ____ No	
Do you have standing water on your property? ____ Yes ____ No	

*Please check for any containers that can hold water such as flower pots, boats, buckets, tires, inflatable pools and toys. These small reservoirs can produce many mosquitoes. Please empty all standing water and remove or cover any containers if possible.*

CHECK ANY OF THE FOLLOWING THAT PERTAIN TO YOUR PROPERTY		
YOUR PROPERTY	NEIGHBORING PROPERTY	
_____	Woods	_____
_____	Pond / Lake / Swamp	_____
_____	Ditch	_____
_____	Other	_____
		Describe "Other"

<b>Special Instructions</b>	
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