



MONTROSE TOWNSHIP MOSQUITO ABATEMENT

2015 PROPERTY INSPECTION & TREATMENT FORM

Complete this form and email to Rose Pest Solutions at mosquito@rosepest.com.
If there are any questions, contact Mark Emmendorfer, Township Supervisor at either:
810-639-2021, or memmendorfer@montrosetownship.org.

DATE _____

NAME _____

ADDRESS _____

HOME PHONE _____ CELL PHONE _____

EMAIL _____

Yes, I would like to participate in the 2015 Montrose Township Mosquito Abatement Program.
 Please contact me to schedule an appointment.
 No appointment is necessary, please include me in your schedule.

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"	_____
_____		_____
_____		_____

Special Instructions _____

