



**Town of Dartmouth  
Board of Health  
400 Slocum Road P.O. Box 79399  
Dartmouth, MA 02747**



**Public Health**  
Prevent. Promote. Protect.

Wendy W. Henderson, R.S. Director  
Telephone: 508-910-1804  
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Thomas W. Hardman, Chair  
Linda Motha  
Gail Davidson, M.D.

TO: Town Clerk

DATE: \_\_\_\_\_

Pursuant to regulations adopted by the Massachusetts Pesticide Board 333 CMR 10.01 (21), I hereby register the property listed below for exclusion from public area-wide applications for the year 2010.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Telephone: \_\_\_\_\_

**I request exclusion from the following pesticide application programs:**

Bristol County Mosquito Control

Other (Please specify): \_\_\_\_\_

The boundaries of the property to be excluded will be marked every fifty feet (50') with orange surveyors tape or another Department-approved marking device, which clearly defines the area of exclusion. These markings shall be made known to the Contracting Entity, who shall be responsible for communicating the details of their marking to those who will carry out the application.

Specify: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**MUST BE SUBMITTED BY MARCH 1 AND IS EFFECTIVE FROM APRIL 1 OF THE YEAR FILED THROUGH MARCH 31 OF THE FOLLOWING YEAR.**

**If you have additional questions or concerns, residents may contact the Bristol County Mosquito Control Program 1- (508) 823-5253.**