

Please fill out form and send it back to Ottawa Public Health by:

Email: [healthsante@ottawa.ca](mailto:healthsante@ottawa.ca)

Mail: **ATTN: West Nile virus Program – MacKenzie Allen**  
Ottawa Public Health  
Environment & Health Protection Branch  
100 Constellation Crescent, 8E (26-46)  
Ottawa, ON K2G 6J8  
Tel.: 613-580-6744

**RE: Authorization to apply larvicide on private property**

I, \_\_\_\_\_ (the owner of the property), authorize GDG Environment to come onto my land located at \_\_\_\_\_ to apply a larvicide into catch basin(s) in order to reduce the risk of West Nile virus.

Please answer the following:

Number of catch basin(s):	<input type="checkbox"/> One (1) <input type="checkbox"/> Two (2) <input type="checkbox"/> Other: please indicate:
Location of catch basin(s):	<input type="checkbox"/> Back yard <input type="checkbox"/> Side yard <input type="checkbox"/> Front yard <input type="checkbox"/> Other: please indicate:
Do you own a dog?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there restricted access to the catch basin(s) e.g., fence, gate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional notes/instructions:	

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

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

Phone number: \_\_\_\_\_