



# CITY OF BURLINGTON BOARD OF HEALTH

645 Pine Street  
Post Office Box 849  
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## PESTICIDE/HERBICIDE USE APPLICATION

The City considers pesticides detrimental to environmental and human health when used within five hundred feet of Lake Champlain or its tributaries, unless proven otherwise. In order to prevent unnecessary exposure to such chemicals, the Board of Health reviews pesticide use applications within this **Buffer Zone**. The Board of Health grants special approval to herbicide or pesticide use within the Buffer Zone if it is demonstrated that; **1.** Other methods have been used in earnest, **2.** That this pesticide or herbicide is effective and essential for pest control, **3.** The administration of the chemical minimizes risk to the natural environment, and **4.** The administration of the chemical minimizes risk to human health.

Name of Owner \_\_\_\_\_ Date \_\_\_\_\_

Property/Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

DOB or Date of Inc. \_\_\_\_\_ Military Service Status: Active Inactive N/A

Name of Applicator \_\_\_\_\_

Address of Applicator \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Phone \_\_\_\_\_

DOB or Date of Inc. \_\_\_\_\_ Military Service Status: Active Inactive N/A

Certification/License Status: Certified/Licensed Not Certified/Licensed

If certified or licensed please indicate certification/license and certification/license #: \_\_\_\_\_

STAFF USE: STAFF HAVE VERIFIED CERTIFICATION/LICENSE PRIOR TO BOARD OF HEALTH REVIEW YES NO

Buffer Zone: Yes \_\_\_ No \_\_\_ Dimensions:

- ALL property adjacent to any property (in or outside the Buffer Zone) being treated must be notified no more than 10 days before application, but no less than 24 hours before application.
- There must be two postings per property or one posting every 100 feet. Signs posted must meet specifications required in City of Burlington Municipal Ordinance Sec. 17-9(d) (see other side of form).

Description of the area and the problem to be treated: (Please address: how close the area is to the waterway, does the area feed into the waterway, how big is the area, what is the pest, and why is the pest an issue)

Have you previously applied for the same area and/or pest to be treated? (Please explain)

What alternatives to pesticides/herbicides have been tried? (Please address: methods used, how many times these methods were used and over what time period these methods were used)

Commercial name of product and active ingredient:

Amount of product to be used and number of applications as recommended by the label:

Please include the Material Safety Data Sheet for the product being used with your application, if not previously provided in past applications.

Dates and frequency of proposed applications:

Rationale for Use: (Why do you need to use a pesticide/herbicide rather than mechanical removal?)

What is your long term plan to manage this area and/or pest?