



Rodent Baiting: Release of Liability Form

The Village of Oak Park
Department of Public Health
123 Madison St.
Oak Park, IL 60302

708.358.5480
Fax: 708.358.5115
health@oak-park.us
www.oak-park.us/health

I, _____, property owner of _____,
Print Name Street Address

Oak Park, Ill., have requested that the Village of Oak Park treat my property with rodenticide. I understand the work may be done by the Village and/or by its contractor, a licensed pest control operator. I understand that the rodenticide that will be used is poisonous to children, pets and wildlife. I agree to use the highest degree of care in and about my property so that no children, pets or wildlife shall come in contact with the rodenticide.

I understand that I am receiving this service free of charge from the Village of Oak park. In consideration of receiving this free service at my request, I agree to release the Village from liability and to indemnify and hold the Village, its officers, agents, contractors and employees harmless from any claims for property damage, personal injury or illness as a result of the application of rodenticide.

Signature of Property Owner

Date (mm/dd/yyyy)

Phone Number

Email address

Are there dogs at this property?

Yes

No

Submit signed form to one of the following:

Email: health@oak-park.us

Fax: 708.358.5115

Mail: Oak Park Health Department
Rodent Control Program
123 Madison Street
Oak Park, IL 60302

Complete page 2 of this form prior to returning to the Health Department

Map of the Property

Please provide a drawing of the area where you observed the rat(s) below. Include on your drawing:

- Property lines and addresses
- All buildings, homes, garages and sheds
- Place an X where you first saw the rat(s) and draw an arrow along the path the rat ran.
- Identify any holes that may be rat burrows

