

**Vermont Agency of Agriculture, Food & Markets**  
**Application for Mosquito Larvicide Permit**

PERMIT APPLICATION #

1. Applicant Lemon Fair Insect Control District		
Street address PO Box 24		
Town Bridport	State VT	Zip code 05734
Telephone number 802 462-3898		
Contact person and phone (if different from applicant) David Dodge		
2. Name of waterbody(s) Lemon Fair River, Otter Creek		
County(s) Addison		Town(s) Cornwall, Bridport, Weybridge
Is the water body wholly contained on applicant's property? (circle one)    yes <u>no</u>		
3. Total acreage to be treated 1400 acres maximum, actual will vary with treatment date	4. Requested larvicide(s) (names and EPA numbers) See attached list	5. Proposed dates of treatment 4/15/22-9/15/22 (same dates for subsequent years of the permit)
6. Method of application aerial or ground treatment <u>Aerial and Ground Treatment</u>		
7. Uses of waterbody <input checked="" type="checkbox"/> Boating <input type="checkbox"/> Swimming <input checked="" type="checkbox"/> Fishing <input type="checkbox"/> Livestock, watering <input type="checkbox"/> Other	8. Is the water used as a drinking water supply? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  If yes, type: <input type="checkbox"/> Private <input type="checkbox"/> Public	
9. VT Applicator Certificate Number(s) 1205-4665 7B/2022	10. Attach appropriate DIGITAL maps of the proposed treatment site(s)	
11. The Applicant agrees to and accepts the following statements:  a. The sole responsibility for any damage that may result from inaccurate computations and/or improper application of the product falls on both the applicator and the applicant.  b. Applicant must apply the product in compliance with all label conditions.  c. Applicant must guarantee to hold the state harmless from all suits, claims, or causes of action that arise from the Applicant's use or misuse of the product.		
12. I certify that the information in this application is true and accurate.		
Applicant's signature	<u>David A. Dodge</u> Chair	Date <u>2/11/22</u>

Submit application to

VT Agency of Agriculture  
 Attn: Patti Casey  
 116 State Street  
 Montpelier, VT 05620

(email/scan to Patti.Casey@Vermont.gov)