

Request for Declaration of a Browntail Moth Public Health Nuisance

Date:

Name: _____

Title: _____

Mailing Address _____

Email Address: _____

Phone Number: _____

Municipality of request: _____

Brief description of the issue:

How does the municipality intend to use the public health nuisance declaration? (i.e. release of funds, allow for aerial spraying etc.):

Attachments:

- Letter from Maine Forest Service
- Letter from local health officer

For Maine CDC use only

Approved

Denied

Signature:

Director, Maine CDC

Date

Date of Expiration: December 31

Year of Expiration: _____