

## Request for Notification before Non-Exempt Pesticide Applications

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Dear IPM Coordinator, [Name of Public School System],

I am writing to request notification in advance of non-exempt pesticide applications at my child's school, and/or at the school or other site where I am employed by the school district, as per my legal right under the NC School Children's Health Act.

I understand that I can request 72 hour advanced notification for pesticide applications that are not already listed on the school district's annual schedule, if it has one. If there is an annual schedule of pesticide applications for my school site, it has been sent to me, and I can view it at any time by [contacting IPM coordinator or visiting website].

I also understand that notification requirements apply to all non-exempt pesticide applications at the relevant school or other non-school site (office building, garage, workshop, etc.), both indoor and outdoor pesticide applications, and including applications planned for summer recess, holidays, weekends, or after school.

Pesticide products exempt from notification requirements include: antimicrobial cleansers, disinfectants, self-contained baits and crack-and-crevice treatments, and any pesticide products classified by the United State Environmental Protection Agency (EPA) as belonging to the US EPA Toxicity Class IV, "relatively nontoxic."

In addition, I understand that should a pest control emergency require a pesticide application for which there is not adequate time to notify me 72 hours in advance, I will receive a notice of emergency pesticide use less than 72 hours, or as soon as possible after, the emergency pesticide application.

I am requesting notification of pesticide use in the following schools or other sites:

- 1) Name of Student or Employee: \_\_\_\_\_  
School or other site, homeroom or office number: \_\_\_\_\_
- 2) Name of Student or Employee: \_\_\_\_\_  
School or other site, homeroom or office number: \_\_\_\_\_
- 3) Name of Student or Employee: \_\_\_\_\_  
School or other site, homeroom or office number: \_\_\_\_\_
- 4) Name of Student or Employee: \_\_\_\_\_  
School or other site, homeroom or office number: \_\_\_\_\_
- 5) Name of Student or Employee: \_\_\_\_\_  
School or other site, homeroom or office number: \_\_\_\_\_

I would like my primary notification method to be (please check one):

Mail.

Mailing address: \_\_\_\_\_  
\_\_\_\_\_

Phone. Home phone: \_\_\_\_\_  
Work phone: \_\_\_\_\_  
Mobile or other phone: \_\_\_\_\_

Sample Form #2

Email.

Address: \_\_\_\_\_

In case of a problem with my primary notification method, I would like my back up notification method to be (please check one):

Mail.

Mailing address: \_\_\_\_\_

Phone. Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Mobile or other phone: \_\_\_\_\_

Email.

Address: \_\_\_\_\_

I understand that it is my responsibility to maintain communication through the means I have designated above, and that the school is required to try to contact me only once about a pesticide application. If I do not receive the notification because I have not updated my mailing address; my voicemail or answering machine are full or not functioning; or because my email account is not functioning, over quota, or notification from the school is auto-filtered as spam; it is my responsibility to correct the problem. Though they will attempt to alert me to the issue, the school system is not liable.

Sincerely,

Full Name (please print): \_\_\_\_\_

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