



# HEALTH RODENT BAITING – RELEASE OF LIABILITY

The Village of Oak Park  
123 Madison  
Oak Park, IL 60302-4272

708.358.5480  
Fax 708.358.5115  
[health@oak-park.us](mailto:health@oak-park.us)

**Oak Park Department of Public Health  
Environmental Health Division**

## DEPARTMENT OF PUBLIC HEALTH RELEASE OF LIABILITY FORM

I, \_\_\_\_\_, residing at \_\_\_\_\_,  
Print Name Street Address

Oak Park, Illinois have requested that the Village of Oak Park treat my property with rodenticide. I understand that 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.

**Please complete page 2 of this form prior to returning to the Health Department.**

\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Signature of Property Owner

This form must be signed and submitted to the Village of Oak Park, Health Department.

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

Or

Fax To: 708.358.5115



**Public Health**  
Prevent. Promote. Protect.

### Map of Property

Please provide a drawing of the area you observed the rats below. Include on your drawing:

- Property lines and property addresses
- All buildings: homes, garages, 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

