

**I request that no herbicide treatment occur adjacent to our shoreline property in 2023.**

Signed \_\_\_\_\_ Date: \_\_\_\_\_

**All requested information must be entered for verification purposes**

Year: 2023

Property Identification Number(s)

Property Owners Name(s):

Lake Property Address:

City/State/Zip

Phone Number(s): Primary:

Alternate:

Mailing Address (If different from the Sylvia Lake Property Address):