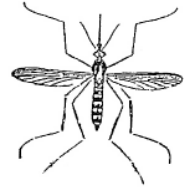




Chambers County  
**Mosquito Control**

Post Office Box 1109  
207 Airport Road  
Anahuac, TX 77514

**Lawrence Lewis, Director**



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**“DO NOT SPRAY”  
REQUISITION**

*Complete this form, which will allow the County mosquito control department permission to set up or pick up the “Do Not Spray” sign on your property. You may mail or email your request to the address listed above.*

Date \_\_\_\_\_ Request \_\_\_\_\_ Refusal \_\_\_\_\_ Pickup \_\_\_\_\_

Name \_\_\_\_\_ Phone No \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Directions to the location (be very specific) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reason for request \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Consentee Signature

\_\_\_\_\_  
Date