



Rodent Demolition Fee: \$20.00

Paid on : _____ Cash _____ Check _____ Online _____

Permit Number: _____

Town of Fairhaven
Office of the Board of Health

40 Center Street, Fairhaven, MA 02719

NOTICE OF RODENT EXTERMINATION PRIOR TO DEMOLITION.

“All structures scheduled for demolition and all excavation materials must be certified by a licensed pest control operator as “RODENT FREE”. The pest control operator shall notify the Board of Health in writing that said structure and/or excavation materials is free of rodent infestation within a period not to exceed 48 hours of the actual demolition”

Address of structure to be demolished:

Type of structure to be demolished:

I certify that the above property is “RODENT FREE” as of _____

(Date of final inspection for rodent infestation.)

Name (Printed)

MA License Number

Signature

Today's Date