

PARTICIPATION FORM

To join the program, please complete the following table, making sure to fill in at least one of the light-grey boxes.

To return please email completed forms to bigcreekphrag@gmail.com or call 226-231-0331 to make alternate arrangements.

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|---|--|
| LANDOWNER <small>(FIRST AND LAST NAME)</small> | |
| LANDOWNER PHONE NUMBER(S) | |
| LANDOWNER EMAIL | |
| CIVIC ADDRESS | |
| LOT/CONCESSION/TOWNSHIP | |
| TAX ASSESSMENT ROLL # | |
| PROPERTY PIN | |
| IF THE LANDOWNER IS NOT THE PRIMARY RESIDENT, PLEASE PROVIDE THE NAME AND PHONE NUMBER FOR THE TENANT. | |
| POINT-OF-CONTACT / TENANT <small>(FIRST AND LAST NAME)</small> | |
| POINT-OF-CONTACT PHONE NUMBER(S) | |

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|--|---|
| PERMISSION TO ACCESS PRIVATE PROPERTY | |
| <input type="radio"/> | I support the Phragmites Control Implementation Plan and I grant permission for the Long Point Phragmites Action Alliance (LPPAA) to access my property, with prior notification at mutually-agreeable times, to identify and map invasive Phragmites australis for the purpose of informing a regional control program. If Phragmites is located on my property, I understand that only data needed to inform the control of this species will be collected. I understand that detailed control methods with timelines for control work will be shared with me prior to implementation on my property and that I reserve the right to withdraw my permission for property access at any time. |
| <input type="radio"/> | I prefer not to support the Big Creek Phragmites Control Implementation Plan at this time. I do not grant permission for the Long Point Phragmites Action Alliance to access my property. |
| CONTROL AND MANAGEMENT PREFERENCES, IF PHRAGMITES IS LOCATED ON YOUR PROPERTY | |
| <input type="radio"/> | I acknowledge that herbicide control is the most effective and efficient approach for managing Phragmites and I grant permission to apply herbicide to Phragmites located on my property in accordance with Ontario's Phragmites Best Management Practices and an Ontario Ministry of Natural Resources and Forestry Pesticides Act exemption approval. I have discussed this matter with all other parties having ownership interest in this property and I am authorized by them to consent on their behalf. I am aware that the details of herbicide control on my property will be shared with me at a later date, and at that time, additional permission forms will be required prior to control work on my property. |
| <input type="radio"/> | I prefer no herbicide control on my property at this time. |
| <input type="radio"/> | I have an agricultural pesticide exterminator license and would be interested in assisting with control of Phragmites on my property. |

www.longpointphragmites.ca

The information collected on this form will not be shared.

The information is collected for the sole purpose of facilitating the control and management of Phragmites in the Big Creek watershed.