BALTIMORE CITY
DEPARTMENT OF
PUBLIC WORKS

RELEASE OF LIABILITY

I Yousef Jabaji , the occupant at 634 S Paca St, Baltimore, MD 21230
(PRINT NAME) *(ADDRESS)*
have control of the yard of the property.

I give my permission to employees of the Baltimore City Department of Public Works to comeonto the property to do work required to exterminate or to bait for rats. I understand that pesticides may be used in this process.

I will do my part by cleaning the yard and removing any bulk items, by not feeding pets outside, and will obtain and use durable garbage cans with tight fitting lids. I also agree to release the City from any claims or actions arising out of or related to the Rat Rubout Program.

The right of entry and permission to do work shall expire 120 (one hundred twenty) days from the date of signature.

SIGNATURE

634 S Paca St, Baltimore, MD 21230
ADDRESS

443-938-1843
CONTACT NUMBER

6/5/2025
DATE

CONFIRMATION NUMBER

_____Sorry we missed you today. Please put your address, signature and the date in the space above. Then mail or fax this permission form to us at the following address:

BUREAU OF SOLID WASTE-RAT RUBOUT PROGRAM

111 SOUTH KRESSON ST, BALTIMORE, MARYLAND 21224

PHONE: (410) 396-3613

EMAIL: PUBLICWORKS@BALTIMORECITY.GOV

********** **FOR**

OFFICE USE ONLY

TO BE COMPLETED BY PEST CONTROL WORKER_____

_____Yes, I have observed rat infestation and treated this property_____ . DATE
_____No, there is no rat infestation_____ .
DATE