WATER CLEANUP HEALTH CONDITIONS DISCLOSURE AND RELEASE

By my signature below, I authorize Roto-Rooter to perform water cleanup work on premises that I own or occupy. This document acknowledges special conditions that exist or decisions that I have made and my agreement to accept full responsibility and hold Roto-Rooter harmless for those special conditions or decisions. I further certify that I have the legal right to bind the property and the owner with my signature.

INITIALS:

Initial _____ **NO SPECIAL HEALTH CONDITIONS**

_____ **SPECIAL HEALTH CONDITIONS**

I, or someone occupying the premises at issue, or someone in my household, has/have known allergies to mold, dust, fungus or chemicals, respiratory problems, special sensitivities to chemicals, or other health conditions that may be adversely affected by the use of materials associated with appropriate restorative measures. I have disclosed such health conditions to representatives of Roto-Rooter and summarized the conditions below:

Person Condition

_____/_____

_____/_____

_____ **NO CHEMICAL ANTIMICROBIALS TO BE USED**

After discussing above health conditions with Roto-Rooter, I agree that beyond the use of ordinary household cleaners and disinfectants, Roto-Rooter shall not apply mildewcides, fungicides or other antimicrobials to kill or inhibit growth of water-caused microorganisms. I accept sole responsibility for any adverse effects that may be caused by my decision and/or actions.

Initial _____ **CHEMICAL ANTIMICROBIALS CAN BE USED**

After discussing above health conditions with Roto-Rooter, I agree that beyond the use of ordinary household cleaners and disinfectants, Roto-Rooter, at its discretion, may apply mildewcides, fungicides or other antimicrobials to kill or

inhibit growth of water-caused microorganisms. I accept sole responsibility for any adverse effects that may be caused by my decision and/or actions.

Signature: Signed by: D0954A3A48284AB... Print name: FRANKLIN PINA

Date: 08/28/2025