

## Mosquito Control Environmental Assessment Form

1. Address: \_\_\_\_\_  
Street City State Zip

### **Risk Factors**

2. Do you see mosquitoes on the property? ☐ Yes ☐ No

a. Adult ☐ Yes ☐ No

b. Larvae ☐ Yes ☐ No

c. If yes, specify what species (if known):  
\_\_\_\_\_

3. Is there any of the following sources of standing water in the yard?

- ☐ Bird Bath ☐ Potted Plants ☐ Buckets ☐ Barrels  
☐ Clogged Gutters ☐ Wading Pool ☐ Uncovered Boat ☐ Covering Tarp  
☐ Used Tires ☐ Well ☐ Toys  
☐ Pet water bowls ☐ Garbage or recycle containers ☐ Debris  
☐ Unoccupied business or other property ☐ Flat roof ☐ Ponds, natural  
☐ Retention/runoff ponds ☐ Fish or Decorative Ponds  
☐ Other, specify. \_\_\_\_\_

4. Are any of the above sources of standing water current breeding sites (contain larvae)?

☐ Yes ☐ No

a. If yes, specify:  
\_\_\_\_\_

5. About what percent of the yard is covered with vegetation?

☐ 0% ☐ 25% ☐ 50% ☐ 75% ☐ 100%

6. Are there any other sources of standing water, such as a pond, near the residence?

☐ Yes ☐ No

a. If yes, specify:  
\_\_\_\_\_

7. Do all the doors have screens? ☐ Yes ☐ No

8. Do all the windows have screens? ☐ Yes ☐ No

9. Are all the screens intact (no tears or rips)? ☐ Yes ☐ No