



Emerald Ash Borer Treatment Form

NAME

ADDRESS

PHONE Residence

Cell

Please indicate the location, quantity and diameter of the ash trees you are treating for Emerald Ash Borer prevention.

Parkway Trees (city property)

Private Property Trees \_\_\_\_ Front Yard \_\_\_\_ Rear Yard \_\_\_\_ Side Yard

PLEASE USE THIS SPACE TO SKETCH YOUR TREE LOCATIONS (Indicate Street Name)

Empty rectangular box for sketching tree locations.

What product and method is used for treatment of the ash tree(s)? (i.e. Meritt, soil drench)

Date of Treatment

What is the name and contact number of the person or company performing the work?

NAME/COMPANY

PHONE

PLEASE NOTE: Annual treatment is necessary for most products. Please continue to update the Village of Downers Grove with treatment dates. Keep for your records any receipts and treatment documentation. Attach a product sheet from the I.D.A. if available.

Send to: Village of Downers Grove Public Works 5101 Walnut Ave.  
PHONE: (630) 434-5460 FAX: 630-434-5571