



House Bill 2409 Opt-Out

Name: _____

Community Name: _____

Address: _____

Lot Number: _____

***By signing below, I hereby choose to indefinitely Opt-Out of pesticide spraying at my home identified above and adopt the responsibility to maintain my yard in the same manner, standards and appearance consistent with the rest of the community. I understand failure to do so may subject me to potential compliance enforcement actions.**

Signature: _____

Once complete, this form must be emailed to Aperion Management at
customerservice@aperionmgmt.com