This AGREEMENT is made by and between Enter Your Full Name Here with an address of Enter Address Here (“Owners”) and the Department of Entomology at Michigan State University (MSU).

1. The Owners are owners of the land located at the following address which is henceforth referred to as the “Property”).

Property Address: Enter Property Address

City/State/Zipcode: Enter City/State/Zipcode

Home Phone : Enter Home Phone Cell Phone: Enter Cell Phone

Parcel Number (located on your property tax bill): Enter Parcel Number

1. The Property owned by the Owners is within the *Vincetoxicum rossicum* (Pale Swallow-wort) biological control project area and contains the invasive Pale Swallow-wort.
2. MSU would like to manage for Pale Swallow-wort on the Property to prevent the spread of this invasive species, and to maintain biodiversity and healthy plant and wildlife populations. Management actions will occur between the 1 March 2020 through the 1 October 2022.
3. The Owners authorize employees of MSU (students, technicians or professors) to engage in management activities on the Property and gives permission to MSU personnel the right to enter the Property to manage Pale Swallow-wort. Owners also authorize the use of a GPS device to record information regarding management activities related to Pale Swallow-wort, installation of temporary markers and signs to notify the Owners or residents of the Property of management activities. Post management, Owners agree to allow for inspection of the management site by MSU for post treatment assessment and to ensure grant requirements by MDNR have been met. To grant permission, please fill out all of the information on this form and sign the form below.
4. Permission to perform Pale Swallow-wort management activities shall be in effect from 1\_day of March 2020 to 1 October, 2022
5. Owner approves use of the following methods (*Check off all methods the owner approves*):

Mechanical (Hand-pulling or digging live plants)

Chemical (Pesticide application in 2 m2 area)

Biological (Releasing *Hypena opulenta*, a host specific herbivore of swallow-worts)

1. The Owners and any Residents agree to allow the treated areas to return to native, natural vegetation, or to the state prior to the Pale Swallow-wort infestation.
2. The Owners acknowledge that data and location information related to Pale Swallow-wort management (geospatial data, treatment type, species inventory etc..) obtained by MSU may be further disclosed and disseminated to grant partners and the MDNR, and is thus permission to disclose and disseminate such information is granted.
3. Owners agree to not introduce invasive plants or crops within the treated areas on the Property.
4. Owners agree not to apply other treatment methods (mowing, pulling, herbicides) while the biological control program is evaluated.
5. Either party may terminate this agreement with or without cause by providing two weeks written/emailed notice to the other party.
6. Pale Swallow-wort management is contingent on the availability of funds and the biological control agent, and management agreement/permission is not a guarantee that treatment activities will occur.

For any questions or for more information, please contact Dr. Marianna Szucs at MSU via email ([szucsmar@msu.edu](mailto:szucsmar@msu.edu)) or phone (517 – 353 – 7063).

Owner Name (*printed*): Click or tap here to enter text. Owner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If Submitted electronically, initial here in lieu of a signature: Click or tap here to enter text.

Date: Click or tap here to enter text.