



DOUGLAS COUNTY FORESTRY DEPARTMENT

VIOLATION REPORTING FORM

To report violation of any County, State or Federal Law on the County Forest

OBSERVER INFORMATION:

Although we encourage you to supply us with your name and contact information, you are not required to. If supplied, we will keep your report confidential upon you request.

Report completed by (first & last name):	Date report completed (mm/dd/yyyy):
Contact Phone Number(s) (with area code):	Contact Email Address:

May we contact you for more information?	Yes	No
Do you want your identity to remain confidential?	Yes	No
Did you personally observe the violation?	Yes	No

VIOLATION INFORMATION:

Describe the violation (be as specific and detailed as possible):
Vehicle(s) involved: (make/model, year, color, state plate, license plate/registration number):
When did the violation occur (date, time, etc.):
Location where the violation occurred (nearest road, legal description, etc. please be as specific as possible):
Number of violators:
Violator name(s) (if known):
Violator description(s) (height, hair color, age, sex, clothing, etc.):
Violator comments (if you spoke to the violator what did he/she/they say):

Please save completed form and email to forestry@douglascountywi.org or print and return to:
Douglas County Forestry Department, PO Box 211, Solon Springs, WI 54873
Please include any photos, maps, or any other supplemental information

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Please use this page to expand on any of the page 1 sections or to provide any other information you think may assist with the investigation.

Additional comments *(be as specific and detailed as possible):*