MAINE DEPARTMENT OF INLAND FISHERIES AND WILDLIFE

284 State Street, 41 SHS Augusta, ME 04333 Phone 207-287-5252/Fax 207-287-6395

Incident Report Form

In accordance with the provisions of MDIFW Chapter 27 rules for an animal damage control agent certification and the administrative policy regarding human-wildlife conflicts, the following document shall be submitted in order to file a formal complaint or document a violation of policy, rules or law regarding human-wildlife conflict resolution.

Information about the Incident			
Date incident occurred:		Time:	
Location of incident	(list facility and permittee n	ame, if known):	
Type of incident bei	ng reported:		
☐ Inappropriate Language/Behavior	☐ Unsafe practices	☐ Inhumane treatment ☐ Failure to report of wildlife	
Personal conflict	Poor Business practices	Inappropriatepossession of wildlife	
Other (Please indica	te):		
species involved etc):		ened, how it happened, factors leading to the event,	
	er witnesses or people and phone numbers if possil		

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Submitter Information					
Individual submitting report (print name):					
Date submitted:	Submitter Contact information: Phone ()				
Report by Submitter is:	Email:				
	Physical Address:				
First- hand					
☐ Third-party					
Complainant's relationship to the Incident:					
□ Customer □	Employee	☐ Town			
□ Volunteer □	Intern	☐ By-stander			
☐ Department Staff ☐) Vendor	☐ Other (please list)			
To Be Completed by Maine Inland Fisheries and Wildlife					
Report received by:					
Action taken:					

Maine Department of Inland Fisheries and Wildlife
ATTN: Animal Damage Control
41 State House Station
Augusta, ME 04333-0041
or via email to: ADCReport.IFW@maine.gov

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