

UNAUTHORIZED ACTIVITY REPORT FORM

We thank you for providing the information on the activity which has raised your concern. Please provide ALL available information. We will use the information provided to initiate an investigation. However, for best results, we ask that you also furnish maps, photographs, and any other pertinent information if it is available.

The following information regarding yourself is optional. You may remain anonymous. However, if you do elect to furnish this information, it will become part of the public record.

Your Name:

Your phone number or email:

THE ALLEGED VIOLATOR:

Alleged Violator's Name:

Alleged Violator's Phone # (if known):

Alleged Violator's Street Address:

Alleged Violator's City:

Alleged Violator's Parish:

Alleged Violator's Zip Code:

LOCATION OF THE ALLEGED VIOLATION (if different from above):

Street Address of the Alleged Violation (or closest directions i.e. intersection, landmarks, etc):

City of the Alleged Violation:

Parish of the Alleged Violation:

Zip Code of the Alleged Violation:

Permit Number (if known):

Description of the Alleged Violation: Please use the box below to specify the nature of the alleged violation which you are reporting, including the affected waterbody.