

Oregon State Police Fish and Wildlife Division
Violation / Suspicious Activity Report Form

Describe Violation or Activity Observed or Advised About:

Describe Location (Road Number, Milepost, GPS, Range, Property, Unit, Waterbody):

City: _____ County: _____

Date: _____ Time: _____ ☐ AM ☐ PM

Number of Person(s) Involved: _____ Male(s) _____ Female(s)

Describe Person(s) (Name, Age, Height, Weight, Ethnicity, Hair Color, Eye Color, Clothing):

Describe Vehicle(s) (Year, Make, Model, Type, Color, Unique Identifiers):

Vehicle License Plate: _____ State: _____

Additional Remarks: _____

Witness Name (Confidential): _____

Phone Number(s): _____

Present Form to an Official or Contact Us:

Oregon State Police Fish and Wildlife Division

Phone: 1-800-452-7888 (Immediate Assistance 24/7)

Mail: 255 Capitol Street NE, 4th Floor, Salem, OR 97310

E-Mail: TIP@state.or.us (Monitored M-F 8:00A.M. – 5:00 P.M.)