Littering and Illegal Dumping Reporting Form

Waste Reduction and Recycling Act 2011

Department of Environment and Heritage Protection (EHP)

This form is to be used if you have witnessed an act of illegal dumping or littering and wish to report the incident to EHP. This form should only be used if you are unable to complete and submit the online form.

EHP can issue an infringement notice to the registered owner of a vehicle based on your report. You may be required to give evidence in court, only submit your report if you are willing to do so.

Fields marked with * are mandatory for a valid report.

1. Did you personally observe the incident?*
   - Yes
   - No
   You are not able to submit a Littering or Dumping report form if you are not the eyewitness of the incident

2. Do you know the person who deposited the waste?*
   - Yes
   - No

3. Are you prepared to go to court if necessary?*
   - Yes
   - No
   This means you may be required to give evidence in court.

4. What did you see?*
   - Littering
     - < 200L (a wheelie bin is 200L)
   - Dumping
     - > 200L

5. Date of incident:*
   - Day
   - Month
   - Year

6. Time of incident:*
   - am/pm

7. Name of any other witness to the alleged offence (if applicable)

Incident details

8. Location at which you observed the Incident:*
   Please provide a location description (street/road, nearest corner, cross street or landmark e.g. bridge, car park, building name, GPS/SatNav coordinates, northbound, southbound etc).

   If the location is broad (e.g. Bruce Highway) please include the closest intersection, landmark or identifiable map reference

9. Nearest suburb or town*

Local government area (if known)

10. Do you have any further information to provide?
    This can include photos, videos, file notes or any information you believe is related to this report
    - Yes
      - please email to infringement.notices@ehp.qld.gov.au or attach to this report
    - No
      - continue to question 12

11. Substance type*

12. Littering substance:
   - cigarette butt
   - litter up to 200L in quantity
   - broken glass on footpath
   - sharps/medical waste
   - lit cigarette
   - small Item of litter (Please describe below)
   - lit cigarette thrown onto combustible material
   - other (please describe below)

13. Dumping substance:
   - animal/meat waste
   - soil materials
   - asbestos
   - plastic bags—contents unknown
   - cars, bodies and parts
   - sharps/clinical waste
   - construction and demolition waste
   - tyres
   - drums
   - white goods, electronic waste
   - and furniture
   - garden waste
   - other (please describe below)

Offender’s action

14. Please indicate how you saw the item(s) being deposited:*  
   - from vehicle/vessel
   - on ground after getting out of vehicle/vessel
   - uncovered load
   - on ground before getting into vehicle/vessel
   - fell or blew off vehicle/vessel
   - combination of two of the above

15. Approximate volume:*  
   - single item (small)
   - multiple items (<200L in volume)
   - single item (large)
   - multiple items (>200L in volume)
   - wheelie bin-sized
   - car trailer-sized
   - Half truckload

Offender’s vehicle details

16. Please select the type of vehicle involved in the incident:*  
   - vehicle
   - vessel
   - trailer

17. Vehicle details:
   Your information enables us to crosscheck the vehicle details with the Department of Transport and Main Roads to avoid mistakes and vexatious reporting. Insufficient or incorrect information may result in your report not being processed.

   Registration:*  
   - State:

   Make:*  
   - Model:

   Shape:*  
   - Colour:

   Other distinguishing features

Offender’s details

18. Location in vehicle:*  
   - driver
   - rear right passenger
   - front passenger
   - other/unknown
   - rear left passenger

19. Gender*
   - Male
   - Female
   - Unknown

20. Description of offender (if seen):

Continued over page...
Witness (your) details
21. Please provide details below*
   Title:* ____________________________  Given name/s:* ____________________________
   Family name:* ____________________________
   Residential address:* ____________________________
   Postal address: (if same as residential, write ‘AS ABOVE’) ____________________________
   Daytime contact phone number: ____________________________
   Date of birth ____________________________
   Email address: ____________________________

22. Would you like to receive further information from EHP?  
   Yes   ☐  No ☐

Witness declaration*
I declare that the information contained in this report is true and correct to the best of my knowledge and that I am willing to give evidence in court if required.

Note: It is an indictable offence to intentionally or negligently provide false or misleading information, penalties may apply.

23. Signature ____________________________  Date ____________________________

Enquiries
If you have any enquiries regarding your lodgement please contact EHP
Phone: 13 QGOV (13 74 68)
Email: infringement.notices@ehp.qld.gov.au

Privacy Statement: The Department of Environment and Heritage Protection collects the information on this form under the State Penalties Enforcement Act 1999 so that the identity of the person who is alleged to have committed the offence may be established. This information is accessible by the other Queensland Government departments and may be used for law enforcement purposes. The information is also accessible by authorised departmental officers and some information may be disclosed to other Queensland Government departments and interstate government authorities. The Department of Environment and Heritage Protection will not disclose your personal details to other third parties without your consent unless authorised by law. For further information please visit the EHP website http://www.ehp.qld.gov.au/legal/privacy.html