

Agricultural Water Quality Concern Form

Completed form may be sent to the Oregon Department of Agriculture Natural Resources Division, 635 Capital St NE, Salem, OR 97301, Fax (503) 986-4730.

Date Filed _____

Individual Filing the Concern:

Name _____

Signature _____

Address _____

Phone _____

Please provide information about the property the complaint is against.

Name of landowner (if known) _____

Phone (if known) _____

Property location (required) _____

Waterbodies allegedly being damaged or impacted (required): _____

Nature of Concern

(check those that apply)

Noxious Weeds

Soil Erosion

Animal Waste Management

Nutrient Management

Damage to near-stream areas

Other _____

Observations and/or evidence leading to concern:

