

# CONFIDENTIAL LITTER REPORT FORM

**EPA VICTORIA CAN ISSUE AN INFRINGEMENT NOTICE TO THE REGISTERED OWNER OF A VEHICLE BASED ON YOUR SIGNED REPORT  
YOU MAY BE REQUIRED TO GIVE EVIDENCE IN COURT - PLEASE ONLY SUBMIT YOUR REPORT IF YOU ARE WILLING TO ATTEND COURT**

ASTERISK \* DENOTES MANDATORY FIELD - IF MANDATORY FIELDS ARE NOT COMPLETED THE REPORT CANNOT BE PROCESSED  
PLEASE WRITE IN BLOCK CAPITALS - PLACE CROSS  IN RELEVANT BOXES

## OFFENCE COMMITTED BY

<input type="checkbox"/> Driver	Vehicle Registration *	<input type="text"/>	(VIC ONLY)
<input type="checkbox"/> Front Passenger	Car Make and/or Model *	<input type="text"/>	
<input type="checkbox"/> Rear LEFT Passenger	Car Body Type *	<input type="checkbox"/> Sedan	<input type="checkbox"/> Station Wagon
<input type="checkbox"/> Rear RIGHT Passenger (Driver Side)		<input type="checkbox"/> Coupe	<input type="checkbox"/> Ute
Sex <input type="checkbox"/> F <input type="checkbox"/> M		<input type="checkbox"/> 4WD	<input type="checkbox"/> Other (describe) <input type="text"/>
	Colour *	<input type="text"/>	

Date \*  Day \*  Time \*  :  am / pm

Street \*

Suburb \*

Nearest cross street \*  Melway ref.

Direction of travel  Nearest landmark

## DESCRIBE WHAT YOU SAW \*

Please ensure that your description is as detailed as possible, including a description of the litter and the offender where possible. **PLEASE NOTE** - You must have seen the littering occur. EPA does not issue Infringement Notices for ashing cigarettes. ONLY report a cigarette butt as 'lit' if you are SURE it was lit. Please retain any notes you made at the time of the incident as evidence to further support your report.

## YOUR DETAILS

Your personal details will remain strictly confidential unless you are required to attend court as a witness. Under the *Information Privacy Act 2000* (Vic), your personal details will not be used for any other purposes without your consent.

Name \*  Phone (H)

Address \*  (W)

Suburb\*  Postcode\*  (M)

Email

\* Please provide at least one phone contact number

## OTHER WITNESS

Name of any OTHER witness (other than yourself - if applicable)

## 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 attend court.

Signature \*

Date \*

**PLEASE RETURN REPORT WITHIN SEVEN (7) DAYS OF THE INCIDENT BY FOLDING, SEALING AND MAILING THIS REPLY PAID LITTER REPORT FORM OR FAX THE FORM TO (03) 9695 2610.**

PLEASE NOTE that it is an indictable offence to intentionally or negligently provide false or misleading information to EPA, and penalties may apply.



# EPA Victoria Litter Report Form

Report online at  
[www.epa.vic.gov.au/reporting](http://www.epa.vic.gov.au/reporting)

No stamp required  
if posted in Australia



**Delivery Address:**  
GPO Box 4395  
MELBOURNE VIC 3001



EPA Victoria  
Litter Fines  
Reply Paid 4395  
MELBOURNE VIC 8060

The personal information on this form and any correspondence, notice or other document issued following processing of this information will be stored and used by EPA for the purposes of administering the *Environment Protection Act 1970*.  
You may access this information by contacting the EPA Privacy Information Officer.  
This information may be disclosed to another government organisation, including to a tribunal or court, where required for the purpose of administering or enforcing the Environment Protection Act or any other relevant laws.

