

DOUGLAS COUNTY SOLID WASTE PROGRAMS

Illegal Dump Report Form

Date: _____

1.) Has the Douglas County Sheriff's been contacted? 509-663-9911 _____ Spoke to: _____

2.) Contact Details:

Name of reporting person: _____ Phone: () _____

3.) Incident Location i.e. (paved or dirt roadway, vacant lot, canal, riverbank)

4.) Dumping Type: (select all that apply)

___ Tires ___ Furniture ___ Yard Waste ___ Dead Animal ___ Garbage Bags

___ Vehicle Parts ___ Household Garbage ___ Appliances ___ Electronics

___ Construction Debris **other** _____

5.) Hazardous Materials: (select all that apply)

___ Asbestos ___ Fertilizer ___ Gasoline ___ Chemicals ___ Medical Waste ___ Oil

___ Diesel ___ Poisons ___ Paint Products **other** _____

6.) Action Taken: _____

If no action taken, detail why not: _____

Describe recommendation for action: _____

7.) Follow Up Action:

Date clean up completed _____ Clean-up Costs: \$ _____ Approximate weight _____ lbs.

Mileage incurred _____ Length of time to clean-up _____ # of workers _____

8.) Photos available? ___ Yes (please attach) ___ No

Signature