

**Northwest Solid Waste District
Enforcement Incident Report**

Incident Report Town

Complaint Time:

Complaint by Whom:

Return Number to be called for follow up:

Violation Information

911 Location: _____

Illegal Burning of:

Illegal Dumping of:

Repeat Violation Yes or No

What was observed (please be specific)?: _____

Name of landowner, if given: _____ Phone# _____