

Suspected Invasive Plant Form



Privacy Notice: Council deals with your personal information in accordance with law including the *Information Privacy Act 2009*.

This form is to be completed when a member of the public would like to report an infection of an existing invasive plant.

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Customer Details

Contact name:

First

Middle

Last

Residential address:

Street number and name

City

State

Postcode

Postal address: *(if different)*

Preferred contact number:

Email:

Preferred delivery method: Email Post Collect – (Rockhampton, Gracemere, Mt Morgan)

Email is the standard form of delivery. If this method is unsuitable please select an alternative.

Invasive Plant Location

Property address of the site:

Street number and name

City

State

Postcode

Location of the invasive plant/s on the site:

Type of suspect invasive plant/s:

Please provide a mud map of the invasive plant/s location on the property:

OFFICE USE ONLY

Date received:

CSO: