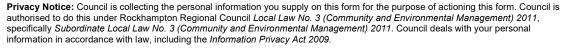
Suspected Invasive Plant Form





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

P: 07 4932 9000 | E: enquiries@rrc.qld.gov.au | W: www.rrc.qld.gov.au | PO Box 1860 Rockhampton QLD 4700 | ABN: 59 923 523 766

| Customer Details | | | |
|---|--|--------|-----------|
| Contact name: | | | |
| First | | Middle | Last |
| 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. Residential Address | | | |
| Residential Address | | | |
| Street number and name: | | | |
| Suburb: | | State: | Postcode: |
| Postal address (if different): | | | |
| Invasive Plant Location | | | |
| Street number and name: | | | |
| Suburb: | | State: | Postcode: |
| Location of the invasive plant/s on the site: | | | |
| Type of suspected invasive plant/s: | | | |
| Please provide a mud map of the invasive plant/s location on the property: | | | |
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OFFICE USE ONLY

Date received:

CSO: