



OFFICE OF COASTAL MANAGEMENT VIOLATION REPORT FORM

Mailing Address: Department of Energy & Natural Resources - Office of Coastal Management | P.O. Box 44487 | Baton Rouge, LA 70804-4487
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REPORT INFORMATION	
Date/Time Reported:	
First Name:	
Last Name:	
Anonymous:	Do you wish to remain anonymous: Yes <input type="checkbox"/> No <input type="checkbox"/>
Mailing Address:	
City, State, Zip Code:	
Phone Number:	
Email:	
I request a follow-up for findings: Yes <input type="checkbox"/> No <input type="checkbox"/>	

ALLEGED VIOLATION (COMPLAINT) INFORMATION	
Responsible Party:	
Physical address/location:	
Section:	Township: Range: Lat. ° ' " Lon. ° ' "
City, State, Zip:	
Parish (of violation):	
Date/Time of Activity:	
Coastal Use Permit Number (if available)	

DESCRIPTION OF ALLEGED VIOLATION/COMPLAINT

DIRECTIONS FOR REACHING VIOLATION LOCATION