Confined Animal Feeding Operations (CAFO) Program
Water Quality Complaint Form

Complaint Taken By: __________________________

Date Reported to CAFO: ________________

Time Reported: __________________________

County: _____________________________

Weather Conditions: ______________________

OPERATION/FACILITY INFORMATION

Operator Name: ____________________________ MA #:______________________

Business Name: ____________________________ Phone: ______________________

Address, City, Zip: __________________________

☐ Dairy  ☐ Calf  ☐ Swine  ☐ Poultry  ☐ Mink  ☐ Beef  ☐ Horse  ☐ Compost  ☐ Other:____________________

Impacted Stream Segment: ____________________________________________

Complaint Specifics: __________________________________________________

______________________________________________________________________

______________________________________________________________________

______________________________________________________________________

OUTCOME

☐ Conducted Complaint Inspection
   ○ Inspection Report #________________________ Inspection Findings: ________________

☐ Transferred Complaint to another Agency/Entity
   ○ Agency/Entity________________________________________ Date:__________________

☐ Other: ____________________________________________________________

______________________________________________________________________

______________________________________________________________________

Oregon Revised Statute (ORS) 468B.217 describes the Oregon Department of Agriculture’s authority for receiving and investigating CAFO complaints. While you are not required to use this form to submit a complaint, the information identified in this form is necessary to conduct an investigation. The information may be sent to the Oregon Department of Agriculture, Natural Resources Division, 635 Capitol St. NE, Salem, OR 97301. Fax: 503 986-4730
COMPLAINANT INFORMATION

Name: ________________________________________________________________

Address, City, Zip: _______________________________________________________________________

Phone: ___________________________ Email: ________________________________

Confidential?  □ No  □ Yes

Notes: __________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

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