

APPENDIX A REPORTING FORM

INTERNAL USE ONLY BY STATE CONTACT OFFICER

File No:
Date:

1 PERSON REPORTING SIGHTING

NAME MR/MRS/MS (circle) (surname) (first name)

ADDRESS (number and street) (suburb/town)
..... (State) (postcode)

TELEPHONE ...(.....)..... (work)(.....)..... (home)

E-MAIL

ORGANISATION/AFFILIATION (if relevant)

2 DETAILS OF SIGHTING

DATE SIGHTED

WHERE? **DESCRIPTION**
.....

LANDMARKS
.....

LATITUDE & LONGITUDE

MAP/CHART REFERENCE

WHAT? **NAME OF SUSPECTED SPECIES**
LEVEL OF CONFIDENCE IN IDENTIFICATION (experience; taxonomic training, other basis for assessment)?
.....

DESCRIPTION OF SPECIMEN/SPECIES

DISTINGUISHING FEATURES

.....

.....

ABUNDANCE/QUANTITY (include estimate of area searched)

.....

SPECIMEN INFORMATION

SPECIMEN COLLECTED? YES/NO

SPECIMEN PROVIDED TO STATE CONTACT OFFICER? YES/NO

SUPPLEMENTARY INFORMATION (*provide if possible*)

HABITAT DESCRIPTION
(include seafloor or other substrate)

.....

DEPTH AT WHICH SPECIMEN WAS SIGHTED/LOCATED (*if relevant*)

.....

3 STATUS OF REPORTED SIGHTING

RECOMMENDATION

CONTINUE INVESTIGATION? YES/NO

REASON/S?

.....

SITE INSPECTION CONDUCTED? YES/NO

DATE OF INSPECTION

NAME OF ASSESSMENT OFFICER

SITE INSPECTION REPORT ATTACHED? YES/NO

4 CONFIRMATION OF SPECIMEN ID

WAS THE SPECIMEN IDENTIFIED BY THE ASSESSMENT OFFICER? YES/NO

IF YES

NAME OF THE SPECIES?

CONFIRMATION OF ID

SPECIMEN WAS DISPATCHED TO

DATE OF DISPATCH

TIME OF DISPATCH

DATE RESULT RECEIVED

RESULT

5 NOTIFICATION AND RECORDING

ORGANISATIONS NOTIFIED OF INCURSION

ENVIRONMENT PROTECTION AUTHORITY (VICTORIA)
Manager Water and Catchment Policy

NAME OF PERSON NOTIFIED

DATE NOTIFIED TIME NOTIFIED

NOTIFIED BY: PHONE/FAX/EMAIL.....
(CIRCLE)

AUSTRALIAN QUARANTINE AND INSPECTION SERVICE
Manager Ballast Water Unit

NAME OF PERSON NOTIFIED.....

DATE NOTIFIED TIME NOTIFIED

NOTIFIED BY: PHONE/FAX/EMAIL.....
(CIRCLE)

CENTRE FOR RESEARCH ON INTRODUCED MARINE PESTS

Head of Centre

NAME OF PERSON NOTIFIED

DATE NOTIFIED TIME NOTIFIED

NOTIFIED BY: PHONE/FAX/EMAIL.....
(CIRCLE)

VICTORIAN CHANNELS AUTHORITY

Navigation Service Manager

NAME OF PERSON NOTIFIED

DATE NOTIFIED TIME NOTIFIED

NOTIFIED BY: PHONE/FAX/EMAIL.....
(CIRCLE)

ENVIRONMENT AUSTRALIA

Manager Introduced Pests Program

NAME OF PERSON NOTIFIED

DATE NOTIFIED TIME NOTIFIED

NOTIFIED BY: PHONE/FAX/EMAIL.....
(CIRCLE)
