



SNARING INCIDENT REPORT FORM



1. INCIDENT DATE: _____ 2. ANIMAL: _____
3. COUNTY: _____ 4. GRID REF: _____
5. LOCATION: WOODLAND / HEDGEROW / OPEN FIELD / OTHER: _____
6. PART(S) OF BODY CAUGHT / INJURIES: _____
7. ESTIMATED TIME IN SNARE: _____
8. SNARE TYPE: SELF-LOCKING / FREE RUNNING
WIRE/NYLON / OTHER
COMMERCIAL / HOME-MADE
9. SNARE SET BY: KNOWN / SUSPECTED: Please give details:
10. REASON: KNOWN / SUSPECTED: Please give details:
11. OUTCOME FOR ANIMAL: (eg treatment, release, death, etc)
12. ENQUIRIES BY: POLICE / RSPCA / BADGER GROUP: Please give details:
13. ENCLOSURES: VET REPORT / PHOTOS / SLIDES / VIDEO / SNARE / OTHER
14. FROM: Name: _____
Address: _____

Tel No: _____
Organisation: _____

Please return this form to Inspectorate Department, RSPCA, Wilberforce Way, Southwater, Horsham, West Sussex, RH13 7WN. Tel: 0870 7540243; Fax: 0870 7530243.

If the animal is a badger, please copy and send to the Badger Trust, 2b Inworth Street, London, SW11 3EP
Tel: 0207 228 6444 Fax: 0207 228 6555 Email: susan.symes@badgergroup.org.uk

PLEASE GIVE DETAILED REPORT OVERLEAF