OREGON DEPARTMENT OF AGRICULTURE
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Wolf Depredation Compensation Program
635 Capitol St NE, Salem, OR 97301-2532
503.986.4550 | Oregon.gov/ODA

CATEGORY 2 – MISSING CLAIMS APPLICATION

Claimant information – livestock/working dog owner completing this form	
Name:	
Mailing Address:	
City:	ZIP:
Home Phone No:	Cell Phone No:
Email:	

Certification and Signature

By signing below, I certify that:

1. I am the claimant, or I represent the claimant listed on this document.
2. All information provided in the application is true and accurate to the best of my ability.
3. I understand the requirements of the Oregon Department of Agriculture's Wolf Depredation Compensation and Financial Assistance Grant Program. I am in full compliance with the program's requirements specified in OAR 603-019.

Applicant signature: _____ Date: _____

Complete information below for qualified missing claims.

Date	Quantity	Species	Age	Ave. Weight	Killed/Injured	Est. Fair Market Value
Total amount of missing claim compensation being requested:						**$**

Did all of the above claims occur in an area of known wolf activity (AKWA)?

- ☐ Yes (If yes, attach a current AKWA map showing the location of wolf depredation.)
- ☐ No

Missing Property Description		
County		**Total grazing acreage**
Township	**Range**	**Section(s)**

Is the claimant the owner of the property where livestock loss occurred?

- ☐ Yes
- ☐ No (If leased, rented, or publicly owned provide the information below.)

Property owner/manager name	**Property owner/manager phone no.**

Was the missing livestock reported to the local ODA brand inspector?

- ☐ Yes (If yes, provide the information below.)
- ☐ No

ODA brand inspector name	**ODA brand inspector phone no.**

Is the current missing livestock claim above your typical/historical percentage of loss records for this herd/allotment/band?

- ☐ Yes (If yes, provide the information below.)
- ☐ No

Brief description of current and historical loss documentation/data for comparision purposes

Please check those factors identified below that were considered for ruling out other possible causes of missing livestock: (include documentation when applicable)

- ☐ Expected losses from birthing complications that are normal when livestock are left unattended during the birthing.
- ☐ Other possible diseases.
- ☐ Changes in herd management or stocking rates.
- ☐ Adverse weather conditions for the period in question.
- ☐ Livestock age – Natural causes of death are more common in older animals.
- ☐ Poisonous plants and other dangers in the area.
- ☐ History of theft in the area.
- ☐ History of other predators in the area.
- ☐ Other

Explain

Describe any evidence of wolf presence at the suspected area of the AKWA during the alleged date your livestock went missing – ie. tracks, scat, reported sighting data from ODFW or other governmental or private parties, photos, VHF or GPS collar data, etc.

Brief description

Indicate and describe the "best management practices to deter wolves" that you were implementing during the time your livestock went missing:

- ☐ Reducing attractants (remove of bone piles, carcass disposal)
- ☐ Barriers (flady and fencing)
- ☐ Human presence (range riders, hazers, herders, individual response)
- ☐ Guardian animals (protection dogs, etc.)
- ☐ Alarm or scare devices (alarm systems, lights and sound devices)
- ☐ Livestock management/husbandry changers (changing pastures, night feeding, changes in calving season and herd structure, etc.)
- ☐ Experimental practices (bio-fencing, belling cattle, airman, etc.)
- ☐ Other

Brief description

Please return completed application by January 31 to:

Union County
1106 K Avenue
La Grande, OR 97850
541-963-1001

Or email to:
apowers@union-county.org
If emailing, please ensure delivery confirmation.