No. FFE-B-A (10)1/2018 Government of Himachal Pradesh, Department of Forests-B Section

From

Additional Chief Secretary (Forests) to the Government of Himachal Pradesh, Shimla-2

To

- 1. Principal Chief Conservator of Forests (HoFF) Himachal Pradesh, Shimla-02
- 2. Principal Chief Conservator of Forests (Wildlife) Himachal Pradesh, Shimla-02

Dated: Shimla-2, the

A February, 2020

Subject:

Submission of report regarding simplification of Forest

Department Procedure.

Sir/Madam,

I am directed to refer to your letter No. WLM/Human Animal \$\frac{1}{25}\$

Conflict/ 3274 dated 25.07.2019 on the subject cited above and to enclose herewith Proforma/ reporting formats I & II for seeking relief amount due to losses caused by Wild Animals on human beings and domestic livestock duly approved for taking further necessary action.

You are, requested to circulate the same to all field functionaries under your control and give it wide publicity for benefit of general public. These formats may also be uploaded on Departmental website.

Yours faithfully,

Pr. cct- 2020

du .

Endst. No. Human Animal Conflict/Vol. IV/ 9295-9306 Dated 3/3/2012

- 1. Copy alongwith its enclosures is forwarded to All CFs/CCFs (WL & T) in HP for information and necessary action. They are requested to circulate the same to all field functionaries under their control.
- 2. Copy alongwith its enclosures is forwarded to DFO (Publicity) for information and wide publicity for the benefit of general public.
- 3. Copy alongwith its enclosure is forwarded to CCF (IT, GIS &MIS) office of Pr. CCF (HoFF) HP for information and necessary action. He is requested to upload these formats on the departmental website.

Pr. CCF (Wildlife) HP

2/3/20

Reporting Format for Seeking Relief amount due to losses caused by Wild Animals on Human beings (information to be supplied by the applicant)

- 1. Name of sufferer:
- 2. Age:
- 3. Son/Daughter/Wife of:
- Place of Attack:
 (Village, Tehsil, District)
- 5. Permanent address:
- 6. Date/Time of attack by Wild animals:
- 7. How was the attack by the wild animal confirmed:

*(Postmortem/Medical Report issued by Medical Officer)

8. Date of giving information by the applicant to the concerned Forest Officer:

Signature of the victim/informer

Village & P.O.

Tehsil.

District.

Note: *Production of postmortem report in case of loss of human life, certificate in case of grievous injury, partial & permanent disability and prescription slip as well as verification of actual cost of Medical treatment in case of simple injury (including Monkey bites) from the Medical officer of a Government Institution/Govt. recognized Medical Institution, as the case may be.



Reporting Format for Seeking Relief amount due to losses caused by Wild Animals on Human beings (Information to be supplied by the concerned Forest Officer to Wildlife Warden of the area)

Name of Division:

2.	Range:						
3.	Block:						
4.	Beat:						
5.	Dev. Block/Tehsil:		*				
6.	Attack by which Wild Animal:						
7.	Date & Time of attack:						
8.	. Location:						
Village:							
	(i) Name of Village						
	(ii) Distance from the nearest forest						
	Forest:						
	(i) Name of Forest:						
	(ii) Distance from the nearest habitation	n:					
9.	9. Information relating to the Victim:						
	(i) Name of Victim:						
	(ii) Age of Victim:		*				
	(iii) Male/Female:						
	(iv) What was the victim doing when att	tacked?					
	(v) State of health/ Physical fitness:						
10.	Direction of attack:	(a) Fro	nt/Behind/Side./Other.				
11.	. Was body dragged from the site of attack?						
12.	. Distance dragged						
13.	. Body eaten:						
14.	Portion eaten:						
15.	. How was the attack by the wild animal con	firmed?	*(Postmortem/Medical Report issued by Medical Officer)				
16.	Details of pugmarks taken on spot:						
	i). Length of pugmark:						
	ii) Width of pugmark:						
	iii) Tracing of pugmark:						
	Signature		Signature				
	(Name of Forest Guard)		of Block Officer)				
	I/C of the area)	I/C Blo	ock				
	Signature: (Name of Range Forest (Officer)					

I/C of the Range

Reporting Format for Seeking Relief amount due to losses caused to domestic livestock by the wild animals (information to be supplied by the applicant)

- 1. Name of owner of domestic livestock:
- 2. Son/Daughter/Wife of:
- 3. Permanent address:
- 4. Place of occurrence:

(Cow shed/farm or in forest area)

- 5. Date and time of the attack by Wild animals on livestock:
- 6. Details of domestic livestock killed by Wild animal:
- 7. How was the attack by the wild animal on live stock:

*(Death certificate furnished by the designated authority)

8. Date of giving information by the applicant to the concerned Forest Officer:

Signature of the Owner Village & P.O. Tehsil.
District.

Note: *The verification of loss of cattle that was actually caused by wild animal can be done by the Pradhan/Up Pradhan of Panchayat/Patwari/President Notified Area Committee/ Chairman, Municipal Committee, Commissioner/ Mayor/Deputy Mayor, Municipal Corporation of the area/Elected Member of the Cantonment Board area/Councilor of the area, Range Officer/Deputy Ranger/Forest Guard or any other forest officer higher in rank than a Range Officer, Veterinary Officer or Veterinary Pharmacist or officer authorized by Veterinary officer of the area.



Reporting Format for Seeking Relief amount due to losses caused to domestic livestock by the wild animals (information to be supplied by the concerned Forest Officer to Wildlife Warden of the area)

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	Name	of D	ivision	

- 2. Range:
- 3. Block:
- 4. Beat:
- 5. Village.
- 6. Name of the Development Block/Tehsil:
- 7. Attack by which Wild Animal on domestic livestock:
- 8. Date & Time of attack:
- 9. Location:

Village:

- (i) In Cowshed:
- (ii) In Farm:
- Distance from the nearest forest: (iii)

Forest.

- Name of Forests: (i)
- Distance from the nearest habitation: (ii)
- 10. Was body of killed domestic livestock dragged from the site of attack?
- 11. Distance dragged:
- 12. Body eaten:
- 13. Portion eaten:
- 14. How was the attack by the wild animal confirmed?

*(Death certificate furnished by the designated authority)

- Details of pugmarks taken on spot: 16.
 - i). Length of pugmark:
 - ii) Width of pugmark:
 - iii) Tracing of pugmark:

Signature

Signature

(Name of Forest Guard) I/C of the area)

(Name of Block Officer) I/C Block

Signature (Name of Range Forest Officer) I/C of the Range

