

# EASTERN COYOTE SIGHTING / MORTALITY REPORT FORM

**Mail To:** Division of Fish & Wildlife  
Northern District Office  
26 Rt. 173 West  
Hampton, NJ 08827  
**FAX:** (908) 735-5689  
**E-mail:** [Joseph.Garris@dep.nj.gov](mailto:Joseph.Garris@dep.nj.gov)

**Or** Division of Fish & Wildlife  
Nacote Creek Research Station  
PO Box 418  
Port Republic, NJ 08241-0418  
**(609) 748-2057**  
[Andrew.Burnett@dep.nj.gov](mailto:Andrew.Burnett@dep.nj.gov)

**Reported By:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Reported To:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Report Date:** Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**Specific Location:** \_\_\_\_\_

**Township:** \_\_\_\_\_ **County:** \_\_\_\_\_

<b>Wildlife Mgt. Unit</b>	
<b>FOR DIVISION USE</b>	

## SIGHTINGS

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **AM** **PM**  
Month Day Year

**Was coyote(s) observed?** YES NO

**Was coyote(s) only heard?** YES NO

**Number of coyotes:** \_\_\_\_\_

### **Description of Animal(s)**

**Was this an adult?** YES NO **Estimated weight:** \_\_\_\_\_

Hair color: \_\_\_\_\_

**Hair loss observed?** YES NO

Other (describe) \_\_\_\_\_

**Behavior (what was coyote doing)?** \_\_\_\_\_

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**FOR DIVISION USE**

**MORTALITIES**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **AM** **PM**  
Month Day Year

<b>Cause of Mortality (Check one)</b>	
<b>Vehicle kill</b>	<b>Destroyed due to disease</b>
<b>Legal trapping</b>	<b>Destroyed due to damage complaint</b>
<b>Legal hunting</b>	<b>Unknown / Other</b>

Was the coyote recovered?                      **YES**                      **NO**

**Description of Animal (Please provide available information for recovered specimens)**

**Sex (if known)**                      **Male**                      **Female**

**Weight (pounds)**                      \_\_\_\_\_                      **Estimated**                      **Actual**

**Hair color**                      \_\_\_\_\_

**Hair loss**                      **YES**                      **NO**

**Other Information:** \_\_\_\_\_