

# Lake Stewards of Maine

## Suspicious Invasive Aquatic Organism Documentation Form (05/19)

Please fill out ALL information that applies and include this form with any specimen sent to LSM for identification. LIVE ORGANISMS SHOULD NOT BE SENT BY MAIL. Send this form with a photo or preserved specimen or bring it in with your live specimen.

**Please contact LSM prior to shipping or delivering. Thank you!**

LSM • 24 Maple Hill Road, Auburn, ME 04210 • (207)783-7733 • vtmp@mainevtmp.org

**Section 1**

Organism collected by: \_\_\_\_\_

Affiliation: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Town: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ IPP: /IPPCert# \_\_\_\_\_ - \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Section 2**

Organism submitted by: \_\_\_\_\_  
*(IF DIFFERENT)*

Affiliation: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Town: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ IPP: /IPPCert# \_\_\_\_\_ - \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Sample Information**

**Section 3**

Date Collected: \_\_\_\_/\_\_\_\_/\_\_\_\_ Waterbody: \_\_\_\_\_ MIDAS: \_\_\_\_\_

Town: \_\_\_\_\_ County: \_\_\_\_\_

Have you contacted:  LSM  DEP *If not please call LSM at 783-7733.*

Date of contact \_\_\_\_/\_\_\_\_/\_\_\_\_ Name of contact: \_\_\_\_\_

Sample/Photo was:  Mailed  Delivered  Emailed Date sent: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mail or Deliver Samples to:  
LSM, 24 Maple Hill Road  
Auburn, ME 04210

**Check if specimen from a Courtesy Boat Inspection**

**Section 4**

Boat Entering  Boat Leaving

CBI Sample ID # \_\_\_\_\_

Name/location of boat launch:  
\_\_\_\_\_  
\_\_\_\_\_

**Check if specimen collected in the waterbody**

**Section 5**

Was the organism alive when collected?  Yes  No

Location where the plant specimen was collected:  
\_\_\_\_\_  
\_\_\_\_\_

Did you mark the location?  Yes  No

Describe: \_\_\_\_\_

Map showing specimen location attached:  Yes  No

**Staff Use Only**

**Section 6**

Date specimen arrived: \_\_\_\_/\_\_\_\_/\_\_\_\_ Received by: \_\_\_\_\_

Sample identified by: \_\_\_\_\_ Affiliation: \_\_\_\_\_

Sample identification: \_\_\_\_\_ Date of ID: \_\_\_\_/\_\_\_\_/\_\_\_\_

Degree confidence (circle one): P H M L Invasive Aquatic Plant? (circle one): Y N S P

Submitter contacted? \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Further action(s) warranted:  Yes  No Action(s) Comp.

Comments: \_\_\_\_\_

DATA ENTRY

Record # \_\_\_\_\_

Entered By \_\_\_\_\_

Entry Date \_\_\_\_/\_\_\_\_/\_\_\_\_