## **FORM G6**

**PENDING BILLS VERIFICATION COMMITTEE (PBVC)**

**HUMAN AND WILDLIFE CONFLICT COMPENSATION**

**COMPENSATION TO PERSONS INJURED (PERMANENT OR TEMPORARY) (ACUTE OR SEVERE) SUBMISSION FORM**

**PART 1: DETAILS OF THE PENDING BILL CLAIM**

**Name of Entity/Institution:** …………………………………….……………………………………..

**Name of Affected Person:** …………………………………………………………………………and

**ID NO**: ……...………………………………………

**P.O. Box** ………………. **Code: …**………… …..**City/Town:** ……………………………………………

**Cellphone No:** …………………………………….………………………………….……………………

**Approved Full Compensation Amount**……………………………………….…………………………

**Amount Already Paid**……………………………………………………………………………………

**Amount to be Compensated as Pending** Kes…………………………………………………………….

**Description of the Compensation related to human and wildlife:** ………………….……………………………………………………….……………….……………………………………………………………………………………………………………………………………..………………………………………………………………………………………………………………..

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**Financial Year when the incidence took place**: …………………………………………………………...

**Financial Year when compensation was Approved**:………………………………………………………

**PART 2: PENDING BILL SUBMISSIONS FOR PERSONS WHO HAVE BEEN INJURED (PERMANENT OR TEMPORARY) (ACUTE OR SEVERE) BY WILD ANIMALS**

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| **S/No.** | **REQUISITE DOCUMENTS OF THE INJURED COMPLAINANT/PERSON** |
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|  | **DOCUMENTS REQUIRED AFTER MAKING REPORT TO THE LOCAL POLICE STATION OR LOCAL AREA CHIEF’S OFFICE**  |
| 1.
 | Police Abstract (P3) Form and issued with an Occurrence Book number (OB No.) and his/her cell phone numberOR Report/Letter from the Office of the Local Area Chief to the Local Wildlife Ranger |
|  | Copy of identity card of the Injured Person OR In case of a Minor (less than 18 years of age) copy of the identity card of the Parent/Guardian |
|  |  |
| B. | **MEDICAL REPORT FROM THE LOCAL HEALTH FACILITY**  |
|  | Medical report written and signed by Medical Officer on the severity of the injuries (Acute or Severe).  |
|  |  |
| C. | **REPORT FROM THE COMMITTEE FOR WILDLIFE CONSERVATION (CCWC) FOR COMPENSATION** |
|  4. | County Committee for Wildlife Conservation (CCWC) Report (where applicable) |
|  |  |
| D. | **REPORT FROM THE NATIONAL COMMITTEE FOR WILDLIFE CONSERVATION (NCWC) ON COMPENSATION** |
|  | Approved Compensation Report in respect to Human and Wildlife Conflicts OR Court Awards (where applicable) |
|  | Any other information you may deem necessary |