

ANIMAL CONTROL REPORT FORM

NAME OF PERSON MAKING THE COMPLAINT: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

TIME COMPLAINT RECEIVED: \_\_\_\_\_ A.M. P.M.

DATE: \_\_\_\_\_

DESCRIPTION OF DOG:

BREED: \_\_\_\_\_

COLOR: \_\_\_\_\_

OWNER OF DOG: \_\_\_\_\_

ADDRESS OF OWNER: \_\_\_\_\_

HOW THE COMPLAINT WAS HANDLED

Did you see the dog? \_\_\_\_\_

Was the dog impounded? \_\_\_\_\_

Was warning sent to owner? \_\_\_\_\_

Time involved with complaint. \_\_\_\_\_

\_\_\_\_\_  
Signature of Animal Control Officer

*OFFICE  
USE  
ONLY*