

ANIMAL COMPLAINT FORM

Date of Complaint: _____ Received By: _____

Complainant Name: _____ Date of Incident: _____

Address: _____

City: _____ Prov. _____ Postal Code: _____

Home Phone : _____ Work: _____ Cell: _____

Address/Location of Incident: _____

- Type of Problem/Complaint: Barking/Noise Aggressive Behavior Human Injury Incurred
 Chasing Wildlife Off Leash & At Large Cruelty
 Other _____

Description of Events: _____

Signature of Complainant: x _____

FOR OFFICE USE ONLY:

Animal License #: _____ Breed: _____ Animal's Name: _____

Previous History/Complaints: Yes No If 'Yes', historical info. attached for Dog Control Officer

Action(s) Taken: Phoned Verbal Warning Left message Written Warning
 Meeting with Owner - Date/Time of Meeting: _____
 Referred to Dog Control Officer

Actions Taken By: x _____

Follow-Up Required? Yes Details: _____

- No, FILE CLOSED. If so,
 Copies of all documentation from Dog Control Officer are attached.
 Complaint forwarded to Admin Clerk for tracking in Muniware system.