

Formal Animal Control Complaint Report

REPORTING PARTY

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

ANIMAL OWNERS

NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____

Please describe the nature of the complaint or problem:

Date and Time of Incident: _____

Location of Violation: _____

Description of Animals Involved: _____

Incident Details: _____

[Attact photos/additional pages as necessary]

SIGNATURE

DATE

