

DOMESTIC ANIMAL CONTROL

No. \_\_\_\_\_

RECORD OF COMPLAINT

Date \_\_\_/\_\_\_/\_\_\_  
mo day yr

Complainant Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Property Owner  Other \_\_\_\_\_

COMPLAINT

ANIMAL DESCRIPTION \_\_\_\_\_

LOCATION \_\_\_\_\_ TIME \_\_\_\_\_

EVENT \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referred to Animal Control Warden Date \_\_\_/\_\_\_/\_\_\_