

_____ Last Name

Waterboro Animal Control Officer Complaint Form

Name of Caller _____

Address _____

Phone Number _____

Call Received (Date and Time) _____

Call Returned (Date & Time) _____

Type of Animal _____

License # _____

Rabies Tag# _____

Issue/Complaint _____

Animal taken to/Returned to _____

Date _____

Time _____

Address _____

Mileage _____

Other _____
