



Animal Control Complaint

Date: ___/___/___ Time: ___:___ am/pm

Complainant's Information (this information will remain anonymous to the Complainant):

Name: _____

Address: _____

Phone #: _____

Complaint Information:

Address of complaint: _____

Pet owner's Name: _____

Animal you are complaining about: ___ Dog(s) ___ Cat(s) ___ Other

Description of Pet: _____

Type of Complaint:

Excessive Barking

Running Loose (Cats or Dogs not restrained off the property of their owner)

Waste (Owner does not pick up waste left on the property of others)

Unsanitary conditions (Accumulation of waste on pet owners property)

Other

Please include a description of complaint (include times, location, animal descriptions, etc) on the back of this form.

In order to investigate complaints adequate information must be provided to verify the complaint's location and the alleged violation. Violations that can be verified by RMPM may be cited or other measures taken to insure compliance with the Loveland Municipal Code.