

Shire of Carnarvon

**PRELIMINARY DOG
ATTACK REPORT**



Complainant (Name) _____

Address _____

Telephone No (Home) _____ (Business) _____

Time of Notification _____ (Date) _____

Name of Attack Victim _____

Date of Attack _____ Location _____

_____ Time _____

Breed & Description of Dog (s) _____

Owner/Address of Dog (s) (if known) _____

Was owner in attendance when attack occurred? YES NO

Was the owner advised of attack? YES NO

Details of conversation _____

Details of attack _____

Was physical injury caused? YES NO Doctor/Hospital Treatment YES NO

Extent and location of injuries _____

Any other damage (clothing, bicycle etc.)? YES NO

Details _____

Ranger's Comments _____

Signature (Ranger) _____ Date _____

Senior Manager's Comments _____

Signature (Senior Manager) _____ Date _____

Action on File

- Investigate Further
- Close File
- Warning
- Issue Infringement. (Not for Attack)

(Mark areas relating to injuries caused on people or animals. Correct injury location and description can assist in identifying the type of dog involved)

