

**Department of Animal Services**

205 Tozer Street

Madera CA 93638

(559) 675-7891 FAX (559) 675-7617

REMEMBER TO SPAY AND NEUTER



**Report Request**

Date of Event \_\_\_\_/\_\_\_\_/\_\_\_\_

Time of Event \_\_\_\_\_

Location of Event: \_\_\_\_\_

Report# \_\_\_\_\_

Animal ID # \_\_\_\_\_

Report type (please check one)

\_\_\_\_ Animal Bite

\_\_\_\_ Incident Report

\_\_\_\_ Barking Dog

\_\_\_\_ Impound Report

\_\_\_\_ Stray Report

\_\_\_\_ Other, Please enter details below:

\_\_\_\_\_  
\_\_\_\_\_

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Other Involved Party (if known):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of Animal(s): Dog(s) \_\_\_\_\_ Cat(s) \_\_\_\_\_ Other (s) \_\_\_\_\_

Please describe the records or reports you desire:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Completed form can be returned to our department either by:

- Mailing to: 205 Tozer Street, Madera, Ca 93638
- Emailing to: AnimalControl@Maderacounty.com

Once received: Madera County Animal Services has 10 days to respond/send requested information.