

Dog attack investigation request



When to use this form

Use this form if you or your animal has been attacked by a dog and you would like the City's Animal Management Officers to investigate.

If you would prefer to talk to someone, you can contact our Animal Management team by telephone on 6238 2711.

Location of incident

Unit/street number (or name of location, such as Princes Park) Required

Input placeholder

Street name Required

Input placeholder

Suburb Required

Input placeholder

Details of incident

What or who has been attacked? (Select one or more options) Required

- person(s)
- dog(s)
- rabbit(s)
- chicken(s)
- other

If other, please provide details Required

Date of attack Required

D	D	M	M	Y	Y	Y	Y
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Approximate time of attack Required

Input placeholder

Detailed description of what happened Required

Input placeholder

What did the dog look like? (if known, include a detailed description such as breed, colour, size and details of collar) Required

Input placeholder

Was the dog with a person? (Select one option) Required

- yes
- no

If yes, please provide a description of the person (and their name, if you know it)

Input placeholder

Do you know where the dog is kept? (Select one option) Required

- yes
- no


If yes, please provide as much detail as possible, (including the address where the dog lives, or the approximate location if you don't know the exact address).

Input placeholder

Did you get medical or veterinary help after the attack? (Select one option) Required

- yes
- no

If yes, where possible if you could include a copy of any documentation (such as a report) that may outlined the injuries sustained. Include photos if you have them.

 Please attach all files to the end of this form before submitting it.

If you need to send more than three files please email them to coh@hobartcity.com.au and refer to the form receipt number, which is shown when you submit this form.

Please provide any other information that may help our Animal Management Officers in the investigation.

Input placeholder

Personal details

Please note that your contact details are needed for our Animal Management Officers to act on this request and so we can keep you informed. This information remains confidential and is not disclosed to the owner of the dog.

First name Required

Input placeholder

Last name Required

Input placeholder

Email address

Input placeholder

Telephone number Required

Input placeholder

Address Required

Input placeholder

Postal address (if different to above)

Preferred contact method (Select one option) Required

- email
- telephone
- Australia Post
- SMS

Declaration

I declare the information I have provided is true and correct.

Name of signatory Required

Acknowledgement (Select one option) Required

- by selecting this I acknowledge that I have signed this form

Date Required

D	D	M	M	Y	Y	Y	Y
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For information on how Council manages, handles, and protects personal information it collects please refer to the [Privacy Statement and Policy](https://www.hobartcity.com.au/Council/Legislation-and-by-laws/Privacy-statement) <https://www.hobartcity.com.au/Council/Legislation-and-by-laws/Privacy-statement>.

End of form

Don't forget to attach all files before submitting this form