IFAT12414

DBV SPCA

CRUELTY COMPLAINT FORM AND INSPECTOR'S REPORT

Complaint No.

DATE OF COMPLAINT: 13- January-2023 TIME: 12:11

COMPLAINANT DETAILS:

NAME & SURNAME: Adele.

ADDRESS:

E-MAIL: TEL: CELL: 065 329 4390

ADDRESS OF PREMISES / PERSON TO BE INVESTIGATED:

NAME & SURNAME:

ADDRESS: 170 Elof~~dal~~ street, Mayville. Elof dal

E-MAIL: TEL: CELL:

NATURE OF COMPLAINT:

Dog is being mishandled. No access to food. The dog remains on the bed the whole time.

Complainant notified:	Date: 17/1/2023	Time:
Telephonically	E-mail	In person

INVESTIGATION REPORT

DATE: 14/1/2023 TIME: WARNING No

Access granted by:

List animals seen:

Concerns	Yes	No
Water available		
Adequate shelter available		
Adequate space available		
Clean living environment		
Animal/s chained / tethered / caged		
Animal/s in good condition		
Veterinary problems / health concerns		

Note: Any concerns noted in this table must be explained in detail in the Inspector's report.

Report/Findings:

The complaint has been investigated and on our conversation with the complainant, she stated that the matter has since been resolved and that the conditions are now acceptable. Case finalized on our side.

Action taken: *(i.e. warning, education, seize, etc)*

INSPECTOR: MPHO L[illegible] **SIGNATURE:**

FOLLOW-UP INSPECTION

DATE: _____ TIME: _____ WARNING No _____

Access granted by: _____

List animals seen: _____

Concerns	Yes	No
Water available		
Adequate shelter available		
Adequate space available		
Clean living environment		
Animal/s chained / tethered / caged		
Animal/s in good condition		
Veterinary problems / health concerns		
Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings: _____

Action taken: *(i.e. warning, education, seize, etc)* _____

INSPECTOR: _____ **SIGNATURE**: _____

FOLLOW-UP INSPECTION

DATE: _____ TIME: _____ WARNING No _____

Access granted by: _____

List animals seen: _____

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Note: Any concerns noted in this table must be explained in detail in the Inspector's report.		

Report/Findings: _____

Action taken: *(i.e. warning, education, seize, etc)* _____

INSPECTOR: _____ **SIGNATURE:** _____

Outcome of case:					
No welfare concerns - NFA		Owner complied - NFA		Animal/s confiscated	
Animal/s signed over		Animal/s given away		Owner moved	
Charges laid		SAPS CAS No.		OB No.	
If referred, to who?				Date & time:	