



CRUELTY COMPLAINT FORM AND INSPECTOR'S REPORT

IFC111315
Complaint No.

DATE OF COMPLAINT: 1 - March - 2023 TIME: _____

COMPLAINANT DETAILS:

NAME & SURNAME: Anonymous

ADDRESS: _____

E-MAIL: _____ TEL: _____ CELL: 066 253 3752

ADDRESS OF PREMISES / PERSON TO BE INVESTIGATED:

NAME & SURNAME: _____

ADDRESS: 729 Frederika Street, Rietfontein

E-MAIL: _____ TEL: _____ CELL: _____

NATURE OF COMPLAINT:

Owner beats his pit bull dog so badly,
he even chains the dog.
(owner is a bit mental)

Complainant notified:	Date: <u>1 March 2023</u>	Time: _____
Telephonically	E-mail	In person

INVESTIGATION REPORT

DATE: 1 March 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 was investigated by firstly contacting the informant so as to get more information regarding the alleged physical abuse. While conversing with the complainant no conclusive evidence backing the abuse was received. Follow up is necessary.

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

INSPECTOR: Mpho Leribe

SIGNATURE: _____

FOLLOW-UP INSPECTIONDATE: 02 March 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:

Upon the visit to the provided address, we struggled to locate such address and the complainant was contacted to no avail.

Action taken: (i.e. warning, education, seize, etc) No Action NecessaryINSPECTOR: MPHO LEBATHI

SIGNATURE: _____

FOLLOW-UP INSPECTION

DATE: _____

TIME: _____

WARNING No _____

Access granted by: _____**List animals seen:** _____

Concerns	Yes	No
Water available		
Adequate shelter available		
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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: _____

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: