



CRUELTY COMPLAINT FORM AND INSPECTOR'S REPORT

IFB 708344
Complaint No.

DATE OF COMPLAINT: 7 - February - 2023 TIME: 08:23

COMPLAINANT DETAILS:

NAME & SURNAME: Caro

ADDRESS: 24 Sepeng Street, Atteridgeville.

maakecaro12@gmail.com

E-MAIL: _____ TEL: _____ CELL: 072 204 0636

ADDRESS OF PREMISES / PERSON TO BE INVESTIGATED:

NAME & SURNAME: _____

ADDRESS: _____

E-MAIL: _____ TEL: _____ CELL: _____

NATURE OF COMPLAINT:

Complainant was severely attacked by neighbor's dog, then admitted to hospital.

Complainant notified: _____ Date: 8 February 2023 Time: _____
 Telephonically _____ Email _____ In person _____

INVESTIGATION REPORT

DATE: 08 February 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 complainant was contacted and could not be reached.
The idea was to address her complaint and provide guidance and assistance.

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

INSPECTOR: MPHO LEBATHI SIGNATURE: _____

DATE: 15 February 2023

TIME: _____

WARNING No _____

List animals seen:

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.

See attached.

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

INSPECTOR: MPHO LEBATH

SIGNATURE:

DATE: _____

TIME: _____

WARNING No _____

List animals seen:

List animals seen:

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