



Complaint Form Stratford Dog Park Association

Details regarding the Complainant	
Name of Complainant:	
Contact Information of Complainant:	Email <i>(if applicable)</i> :
	Phone:
	Address:
Complainant's dog information:	Name:
	Breed:

Details regarding the offending dog involved in the incident:	
Owner of offending dog information:	Name of Owner:
	Address of Owner:
	Licence Plate Number: <i>(if known)</i>
Name of offending dog:	Breed:

SUMMARY OF THE INCIDENT <i>(Please provide as much information as possible.)</i>	
Date of Incident:	
Details of the incident:	
Name(s) of witnesses – <i>if any</i>	

Date Complaint form was completed: _____ Complaint Form Completed by: _____