

# Animal Impound

Pound #: \_\_\_\_\_

CASE #: \_\_\_\_\_ case assigned to: (Steve Brandt) Call Sign: (3Q21)

Impounded By: \_\_\_\_\_ (Stephen C Brandt) Date: \_\_\_\_\_ Time: \_\_\_\_\_

Responsible Agency: \_\_\_\_\_ (Ephraim City) Impound Location: \_\_\_\_\_

**Reporting Party / Complainant:** Contact via ( **ACO / Dispatch / Other** ) Witness Statement ( **Y / N** )

Name(s): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: (Ephraim 84627)

Phone Number(s): \_\_\_\_\_

Identification: (UDL or other) \_\_\_\_\_ DL #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Signature states the animal (dog / cat / other) does NOT belong to or is known by the **INDIVIDUAL** listed above.

## **Animal Description:**

**Dog**                      **Cat**                      **Other:** \_\_\_\_\_

**MALE**       Neutered **Y / N**                      **FEMALE**       Spayed **Y / N**                      **UNSEXED**

Microchip ( **Y / N** ) Number/Mfg: \_\_\_\_\_

Brands/Marks Etc.: \_\_\_\_\_

NAME \_\_\_\_\_ Placement: \_\_\_\_\_ (Pound)      Pen #: \_\_\_\_\_

BREED \_\_\_\_\_ SIZE \_\_\_\_\_ AGE/Birth \_\_\_\_\_ COLOR \_\_\_\_\_

License Tag ( **Y / N** ) #: \_\_\_\_\_ Year \_\_\_\_\_ Rabies Tag ( **Y / N** ) #: \_\_\_\_\_

## **Reason(s) For Impound:**

**BITE CASE**  -----> **(mandatory 10-day quarantine)**

**COMPLAINT**

**REPORTED**

**STRAY**  (at large)

**OTHER**

(Additional Information) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Animal Release

**Disposition of Case Number:** \_\_\_\_\_

**Pound #:** \_\_\_\_\_

RELEASED owner / other       ADOPTED       (Wag-N-Train **Y** / **N**)      OTHER  (note below)      EUTHANASIA

**Pickup / Kennel Fees:**    ( None / fees reduced / assessed payment )

1<sup>ST</sup> PICK UP \$25       2<sup>ND</sup> PICK UP \$50       3<sup>RD</sup> PICK UP \$100   
DAYS \_\_\_\_\_ X \$10.00 = \_\_\_\_\_ + (pick up fee) = \_\_\_\_\_ TOTAL of \$ \_\_\_\_\_

Payment Receipt number (city): \_\_\_\_\_ Payment Type (cash / check) Check #: \_\_\_\_\_

**Note:** Fees assessed to be paid by owner during regular business hours.

**Release/Other:** [name/ID of individual the animal was released or other info explaining the reason for release]

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_ (Zip Code: \_\_\_\_\_ ) Phone #: \_\_\_\_\_

Photo Identification: (UDL or other) \_\_\_\_\_ DL #: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

[ Released to: **Owner ( Y / N )** ]      [ Released to: **signatory ( Y / N )** Adoption ( **Y / N** ) Other ( **Y / N** ) ] note below

CITATION #: \_\_\_\_\_ **warning (verbal or written) / fine / court appearance / other**

Animal released to **OWNER/GUARDIAN/ADOPTION** Date: \_\_\_\_\_ Time: \_\_\_\_\_

Released Dog to: \_\_\_\_\_ (Print Name)

(must wait 5 full business days to authorize release to for adoption)      (**No Owner Found / Adoption authorized by Owner**)

Released by: \_\_\_\_\_ Signature      (Animal Control Officer -- other)

(Additional Information)

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Note: **Euthanasia** authorized **ONLY** by: Court / Veterinary / (Owner -- **Bite cases ONLY**) / or via Title 18-1-3