



THE COMMONWEALTH OF MASSACHUSETTS

ANIMAL CONTROL OFFICER ANIMAL INTAKE FORM

Animal Control Officers shall report on this form prior to receiving compensation

City or town of: _____ Date: _____
 Intake type: Stray Owner Surrender(attach form) Other _____
 Animal type: Dog Cat Other _____

1. To City or Town Treasurer, I report that I have caught, confined and disposed of an animal as set forth below:

Breed type (Specify) _____ Approx Age: _____ Sex: _____
 Description _____ Date and Time caught: _____
 Where Caught: _____ Tattoo/Microchip: _____ Tag#: _____
 Scanner brand: _____ I confined this animal at: _____ for a period of _____

2. Returned to owner:

Owner contacted on (Date): _____ Contact Method: _____
 Redeemed by owner on (Date): _____ Owner Name: _____
 Owner Phone Number: _____ Owner Address: _____
 Owner exhibited LICENSE NUMBER: _____ in the city or town of: _____
 Owner Paid \$ _____ to _____ for care and custody @ \$ _____ per day for _____ days.

3. Animal was adopted/ transferred to:

Name: _____ Address: _____ Phone: _____
 Purchaser secured a LICENSE NUMBER _____ in the city or town of: _____
 On _____ and he/she paid an adoption fee of \$ _____ paid to _____

4. Rabies vaccination information: (Attach copy of rabies certificate to this form)

Rabies vaccination given by (Name of Veterinarian): _____
 On (Date): _____ Rabies vaccination expires on (Date): _____

4. Euthanasia/ died in care/ other outcome:

Animal was euthanized on (Date): _____ using (Method of Euthanasia): _____
 By (Veterinarian Name and Location): _____
 Animal died in care on (Date and attach report) _____ Other outcome (Date and type) _____

5. Payment:

On account of this animal there is due to animal control for care and custody: _____ days @\$ _____ per day, \$ _____

Signed under the pains and penalties of perjury _____, Animal Control Officer