



THE COMMONWEALTH OF MASSACHUSETTS

ANIMAL CONTROL OFFICER ANIMAL INTAKE FORM

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

TOWN/CITY of _____ Intake # _____ Date: _____
Intake type: ☐ Stray ☐ Owner Surrender(attach form) ☐ Other _____
Animal type: ☐ Dog ☐ Cat ☐ Other _____ Name _____
(Animal)

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 found? _____ Microchip #: _____
Scanner brand: _____ I confined this animal at: _____ for a period of _____

2. Owner Information: ☐ Unknown ☐ Redeemed (RTO) ☐ Surrendered ☐ Other _____ Date _____

Owner contacted on (Date(s)): _____ Contact Method(s): _____
Owner Name: _____ Claimed by Name/ Relation (if different) _____
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. Other Animal Disposition: ☐ Adopted ☐ Transferred ☐ Returned to Field _____ Date _____

Name: _____ Address/ Location: _____
Phone _____ Animal 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): _____

5. Euthanasia/ died in care/ other outcome: ☐ DOA ☐ Euthanasia ☐ Died in Care ☐ Other _____ Date _____

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 Type _____

6. Payment:

For this animal the following was paid for custody and fees: \$ _____ to _____ for _____
Signed under the pains and penalties of perjury _____, Animal Control Officer

ANIMAL CONTROL DEPARTMENT

ACO Notes: _____

ANIMAL CUSTODY FORM

Animal Information:

Intake # _____

Animal Name: _____ Type: ☐ Dog ☐ Cat ☐ Other _____

Description _____ Sex: ☐ NM ☐ M ☐ SF ☐ F ☐ Intact Contract

Vet Care in Custody (Details): _____

☐ Out -of -State OCVI Attached

Person Information: ☐ Owner ☐ Finder ☐ Adopter ☐ Other _____

Name: _____ Address: _____

Best Phone Number: _____ Email Address: _____

Statements (Please Sign all that apply)

Date _____

I (☐ AM ☐ AM NOT) the owner of the above described animal and I give the animal to the Town/City of _____ Animal Control. **X** _____

By signing, I acknowledge that I am surrendering all my interest in the animal. I recognize that all decisions regarding the disposition of this animal is the sole discretion of the Town/City of _____.

X _____

I understand that the Town/ City of _____ does not make any guarantees regarding the disposition of this animal. **X** _____

To the best of my knowledge the above animal (☐ HAS ☐ HAS NOT) bitten anyone in the last ten days.

X _____

I am adopting _____ and I am accepting full responsibility for their shelter and care. I agree to provide them with a safe and humane home, and I will comply with all state and local laws promoting responsible pet ownership. **X** _____

Fee and Fine Schedule

Reason	Amount

Reason	Amount

Total Fees Assigned _____

Animal Control Officer Signature _____ Date _____