## **Under MGL Chapter 140 Section 174G**

all injuries to animals and/or people that occur on the premise of a commercial boarding kennel or training facility must be reported to the licensing authority. The licensing authority shall investigate all complaints. Please submit this form through your

local Town Clerk and Animal Control Officer

## Kennel Injury Reporting Form

Municipality:						
Date Submitted:						
Documents attached:						

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Person Submitting Report:			1	Please check if	you wish t	o remain anonymous.
Name:	Address:		Phone			
Email:	Association with	kennel:	Owner	Employee	Client	Other
Kennel Information:						
Name of kennel/organization:						
Address:		y/Town:				
Owner name:	Phone:		Email:			
Injury Information:	Dog Injury	Human	Injury	Other:		
Please describe the injury/in-	cident:					
Was medical attention received	ved? No Y	Yes If so	, for who?			
Where was the medical atter	ntion received?					
ACO Investigation Information	1:					
Kennel Licensing Status:	Current Expired	1 Revo	sked/Susper	nded Date:		Unlicensed
-	•		-			
Inspection Needed No	Yes Violation F					
Actions Taken:						
Receiving Authority Title:					Date	