



# Animal Control Incident Report



## Complaint Form Information given by the General Public Received by the City of New Meadows Idaho

1. As a citizen of New Meadows Idaho, you must divulge your full name, address, phone number;
2. You must truthfully state the grounds for the complaint or complaints;
3. You must also include the person or persons name the nature of the complaint is about if known;
4. You must also include the time and date on which the action took place;
5. You must also include the location where such action took place;
6. You also acknowledge that you are aware all meetings and phone conversations are recorded for public record;
7. If this is a personnel issue, you agree to be present at a meeting or meetings with the Mayor of New Meadows Id. to present your case;
8. If this issue is deemed a City Council matter you must attend the scheduled city council meeting to discuss and testify on your behalf about said complaint;
9. If you miss the scheduled City Council meeting for any reason your complaint will become null and void. No exceptions to this rule will be allowed;
10. If you do not agree to a meeting or meetings, or miss the scheduled meeting date and time with the Mayor for any reason your complaint can and will become null and void;
11. You will be asked to swear an oath that the information you are about to give before the Mayor of New Meadows or City Council is the whole truth and nothing but the truth so help you god;
12. Should a false statement or complaint given by you about the personnel or other complaint on file, your complaint will become null and void;
13. Should a false statement be given you, you may be charged with slander and held liable in a district court of law;
14. After a completed review of your case, should you have been found to provide false testimony or information, you may be held liable for all costs incurred to examine your case, both time and materials;
15. This document and all other information will become a part of your case file;
16. You acknowledge your understanding of these above mentioned rules by signing and dating this document below;
17. If you choose not to sign this form your case will become null and void.

**By my signature below, I hereby acknowledge that I have read and understand the complaint form information printed above. I further acknowledge that the statements I have provided above (or attached) are true and correct.**

**Complainant's Signature \_\_\_\_\_ Date \_\_\_\_\_**

*** OFFICIAL USE ONLY***		
Date Received: _____	Time Received: _____	Staff: _____
Complaint Forwarded Date: _____		
Citation Issued: <input type="checkbox"/> Yes, Citation # _____	<input type="checkbox"/> No	<input type="checkbox"/> Written Warning Only
Citation Paid: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Complaint Completed: <input type="checkbox"/> Yes, Date: _____ <input type="checkbox"/> No		