Lauderdale County Animal Control Animal Complaint Form 6100 Rocky Lane Marion, MS 39342

Office (601)485-1849 Fax (601)485-2525 Monday-Friday 8AM-5PM; Closed 12PM-1PM animalcontrol@lauderdalecounty.org

Complainant Information –Form MUST be COMPLETED to be processed.

Legal Name_					
Address					
Phone number			Today's Date		
Give a brief	description of th	ne violation. <mark>It <i>MUST</i></mark>	include DATE/LOCATION	<mark>when incident</mark>	
occurred and	d a DESCRIPT.	ION of the animal(s)	in question.		
		Owner's Informa	ntion (<mark>if known</mark>)		
Name					
Address					
Phone #		DL #	DOB		
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		Office Us	se Only		
Remarks					
D	Tr.	n	1' 00" ()		
Date	1 ime	Time Responding officer(s)			