



Connecticut Department of Agriculture  
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## SUSPECTED ANIMAL ABUSE REPORT - *General Public Form*

NAME & PHONE NUMBER OF PERSON REPORTING - <i>must include this</i>				CASE # - FOR DOAG STAFF ONLY		
NAME OF ANIMAL OWNER (if juvenile check box *) <input type="checkbox"/>				TELEPHONE # OF ANIMAL OWNER		
ADDRESS OF ANIMAL OWNER (HOUSE/APT. #, STREET, CITY, ZIP)						
ADDRESS WHERE ANIMAL IS LOCATED, IF DIFFERENT THAN ABOVE (HOUSE/APT. #, STREET, CITY, ZIP)						
DATE AND TIME SUSPECTED NEGLECT OR CRUELTY OCCURRED				ARE THERE CHILDREN IN THE HOME?		
SPECIES OF ANIMAL	BREED	AGE	SEX	COLOR (S)	NAME OF ANIMAL	

NATURE OF HARM, NEGLECT OR CRUELTY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW DID YOU LEARN OF THE SUSPECTED HARM, NEGLECT OR CRUELTY? \_\_\_\_\_  
\_\_\_\_\_

NAME OF SUSPECTS: (if juvenile check box *) <input type="checkbox"/>	ADDRESS OF SUSPECTS:
(if juvenile check box *) <input type="checkbox"/>	
(if juvenile check box *) <input type="checkbox"/>	

PREVIOUS HISTORY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* If a juvenile, check the box

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**PLEASE SEND YOUR REPORT TO THIS EMAIL ADDRESS: [AGR.AnimalControl@ct.gov](mailto:AGR.AnimalControl@ct.gov)**