

Statement Form – Dog Attack

Compliance



Information Privacy Act 2009 collection notice – The North Burnett Regional Council is collecting your personal information for the purposes of performing its functions in investigating an allegation of a dog attack. Your personal information may be accessed by employees, contractors and / or Councillors of the North Burnett Regional Council, and other Government agencies. Your personal information will be handled in accordance with the *Information Privacy Act 2009* (Qld) and may be released to other parties where the North Burnett Regional Council is required or authorised by law to do so.

DETAILS OF COMPLAINANT VICTIM / DOG OWNER WITNESS (please tick)

Given names		Surname	
Address		State	Postcode
Contact number	Email address		

DETAILS OF ALLEGED ATTACKING DOG (if known)

Animal name	
Address where the dog is kept	
Breed	
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Colour
Distinguishing features	
Description of coat / fur (e.g. smooth, scruffy)	
Description of collar	
Size <input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large	
Approximate weight (kg)	Approximate age of dog

DETAILS OF INCIDENT

Did the dog attack you, someone else or another animal?
 You Your Animal Someone else Another Animal No

If the dog involved in the incident attacked someone else, what is their name, address and contact details?

Name

Address

Contact details

Date of incident	Time
-------------------------	-------------

Address where incident took place

Place of incident

<input type="checkbox"/> Public footpath	<input type="checkbox"/> Home of family / friend
<input type="checkbox"/> At a park	<input type="checkbox"/> Private property
<input type="checkbox"/> Public place / school	<input type="checkbox"/> At home of owner / keeper

Was the dog on a leash

Yes No

Describe what was involved in the attack (e.g. lunging, biting, snapping, shaking, taking hold of an animal's neck / throat)

Describe in detail the nature of the injuries sustained from the attack (e.g. bruising of right lower arm, six punctures to left forearm, cuts to right ankle, death of animal, etc)

Are you able to provide photo evidence of these injuries?

Yes No

Describe in detail the medical and / or veterinary treatment that was sought

Are you able to provide doctor and / or vet report/s?

Yes No

Did the dog involved in the incident cause your fear?

Yes No

Describe why you were fearful (e.g. the dog rushed, was growling with teeth bared, etc)

Did the dog involved in the incident cause another animal fear?

Yes No

How do you know the animal was fearful of the dog involved in the incident (e.g. whimpering, cowering, shaking, etc)

What do you believe caused the incident? (e.g. loud noise, dog/s wandering, etc)

Were there any witnesses to the incident? If yes, please provide details:

Name

Address

Contact details

DETAILED STATEMENT OF THE INCIDENT IN CHRONOLOGICAL ORDER

Please ensure you sign the bottom of each page.

A large rectangular area with horizontal lines for writing, intended for the detailed statement of the incident.

This statement is written by the undersigned:

Name

Signed

Dated

DETAILED STATEMENT OF THE INCIDENT IN CHRONOLOGICAL ORDER (Continued)

Please ensure you sign the bottom of each page.

I acknowledge that should this matter proceed to Court or the Queensland Civil Administrative Tribunal (QCAT), I may be required to appear as a witness. I understand I may also be required to continue to assist Council in its investigation beyond providing this statement. I understand if I refuse to appear as a witness (*if required*) or refuse to continue to assist in the investigation Council may be limited in what action it can take as a result of the incident, including not being able to take any action.

Justices Act 1886

I acknowledge by virtue of section 110A(6C) of the Justices Act 1886 that:

- i) This written statement by me dated [redacted] and contained in the pages numbered 1 to [redacted] is true to the best of my knowledge and belief.
- ii) I make this statement knowing that, if it were admitted as evidence, I may be liable to prosecution for stating in it anything that I know is false

Name

Signed

Dated