

# Stray Form

Name: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State and Zip Code: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Secondary Number: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

Animal Name (if known)	Gender	Spayed? Neutered?	Approx. Age	Species/Breed	Color

Address Found At: \_\_\_\_\_

Date and Approximate Time Found: \_\_\_\_\_

Was the animal wearing a collar or ID? -----Yes No

○ *If yes, please describe:* \_\_\_\_\_

To your knowledge, has this animal bitten anyone within the past ten (10) days?----Yes No

○ *If yes, please describe the incident:* \_\_\_\_\_

\_\_\_\_\_  
**(Initial)** I hereby certify that the animal(s) listed above are stray and have not been taken from a property.

\_\_\_\_\_  
**(Initial)** I understand that if it is found that I have unlawfully taken or obtained the animal(s) I will become part of an animal control investigation and if found guilty of a crime, I will be charged to the fullest extent of Montana's Law.

*By signing, I give permission for this document to be given to any law enforcement official to be used in whatever means they deem necessary. By signing, I certify that the information listed above is true to the best of my knowledge.*

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Comments** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Office Use Only:</b>	Accepted: _____	Denied: _____
Reviewed by: _____		
Veterinary Technician: _____		
Reason for Denial: _____		