Statement Form - Dog attack allegation

Privacy Collection Notice

Logan City Council is collecting your personal information for the purposes of performing its functions in investigation an allegation of a dog attack. Your personal information may be accessed by employees, contractors and / or Councillors of Logan City 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 Logan City Council is required or authorised by law to do so. For more information on Council's Privacy Policy, see logan.qld.gov.au/privacy.

DETAILS OF: □ 0	COMPLAINANT		DOG OWNER	□ Wi	TNESS	(please tick)		
Name					Date of birth			
Address					T			
Audress					Postcod	е		
Contact details:	Phone							
	Email							
DETAILS OF INCIDEN	NT							
Date of incident				Time				
Address / location where incident								
took place								
DESCRIPTION OF DOG (e.g. distinguishing features like spots, markings, sex, breed, colour, size, collar)								
					•			
						•		



TELL US WHAT HAPPENED	
If necessary, please complete additional pages and s	ign each page.
I have been advised by	ppear as a witness. I understand I may tigation beyond providing this statement s (if required) or continue to assist in the
Justices Act 18	386
I acknowledge by virtue of section 110A(6C) of the Justice	es Act 1886 that
 (i) This written statement by me datedand contain true to the best of my knowledge and belief. (ii) I make this statement knowing that, if it were admitted prosecution for stating in it anything that I know is false. 	as evidence, I may be liable to
Name:	
Signature:	Date: / /



TELL US WHAT HAPPENED (Continued)							
If neces	ssary, please complete addition	al pages and	d sign each page.				
This statement is written by the undersigned:							
NI		0:1		D = 1 :			
Name		Signature		Date			

