North Jefferson City Dog Park Complaint Form

Your Information
Name: _____
Address (city/state/zip): _____
Phone: _____
Email: _____
Dog's name: _____ Permit #: _____

Other Dog Information
Name: _____
Breed/color/sex: _____
Permit #: _____
Tag #: _____
Distinguishing characteristics: _____
_____

Other Owner Information
Name: _____
Address: _____
Phone: _____
Car license plate #: _____
Description of vehicle (make/model/color): _____

Incident Information
Date/Time: _____
Location (Circle one): big dog park small dog park other:_____
Description of incident: _____
_____
_____
_____
_____
(Continue on back of form if needed)

Witness Information
Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____

Please return completed form to:
Jefferson City Parks, Recreation and Forestry
427 Monroe St.
Jefferson City, MO 65101

Phone: (573) 634-6482
Fax: (573) 634-6489
Email: jcparks@jeffcitymo.org