



DOG FOULING INCIDENT REPORT

DATE:

1. Please state date, place and time where dog fouling occurred. (e.g. street name, nearest property no., on grass or footpath).

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2. Please describe person and dog being walked. (e.g. man or woman, boy or girl, dog breed type, size and colour etc).

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3. Did the person appear to know that that their dog had fouled? (This could be that the dog was off its lead and some distance from the person).

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4. Was the person known to you? If so, please provide details. (name and address etc). If in a vehicle, provide registration number.

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5. Please state your name and contact telephone number. (This will be kept confidential by Antrim Borough Council).

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Please send to:
Antrim Borough Council
Regulatory Services
FREEPOST RRHE-LEUK-YKKR
50 Stiles Way
Antrim
BT41 4DQ
T. 02894463113