

Animal Control Request for Action Form No. _____

Date: _____
Received by: _____ Phone Extension _____
Via: Phone _____ Letter _____ In Person _____ Other _____

1. Complainant Information

Name: _____
Address: _____ City/State: _____ Zip Code: _____
Day phone: _____
Eve phone: _____
Cell/msg: _____

2. Problem/Situation:

3. Solution Desired:

4. Forwarded for action to: _____ Date _____

5. Resolution (attach written response):

6. Closed by _____ Date _____

Office Use:							
Customer Service	<input type="checkbox"/>	Kennel	<input type="checkbox"/>	Code Enforcement	<input type="checkbox"/>		
F	<input type="checkbox"/>	Adoptions	<input type="checkbox"/>	T17	<input type="checkbox"/>	SLOW/NO Response	<input type="checkbox"/>
UF	<input type="checkbox"/>	Refunds	<input type="checkbox"/>	Other	_____		

Please fax to 343-8134 or mail to Animal Control at 4711 Elmore Road, Anchorage, AK 99507 for resolution. For questions call 343-8118.