Town of McClellanville
Animal Complaint Form

Phone number 843-887-3712
Town of McClellanville
405 Pinckney Street
McClellanville, SC 29458

Please print and complete this form in its entirety. An incomplete or unclear submission may cause a delay in processing. Anonymous complaints are not accepted.

Your Name _____ _____
Please Print (First) (Last)

Mailing Address: _____
(Street)
_____
(City) (State) (Zip)

Phone: (_____) _____-_____
(Area Code) (Phone Number)

Owner of Complaint Animal; Name/address/phone number:

_____

_____

Incident Information/Description:

Location: _____

Date and Time: _____

Description of Dog: _____

Description of Incident and comments:

_____

_____

_____

Did you notify Charleston Co. Sheriff office: **No** ☐ **Yes** ☐

Witnesses' Names and Phone Numbers:

_____

_____

I certify that the information provided on this form is true. I further hereby agree to testify as the complaining witness if this matter should proceed to trial.

_____ _____

Signature **Date**