



Clermont County Public Health

Prevent. Promote. Protect.

Animal Bite Report Form

Please complete this form completely. If you do not have complete information, please call 513 732-7499 as soon as it is obtained. Thank you for your cooperation in this matter.

Today's Date _____

Person Completing Form _____

Address: _____

Telephone: _____

Victim Name _____

Address: _____

Telephone: _____

Age: _____

Parent (if victim is a minor): _____

Type of Animal _____

Description: _____

Date of Bite: _____

Location of Injury: _____

Animal Owner _____

Address: _____

Telephone: _____

Doctor or hospital where treatment has been or will be received:

3.11.2016