

# Animal Bite Incident Report

## Victim Information

Full Name:

Age:

Address:

Contact Number:

## Incident Details

Date of Incident:

Time of Incident:

Location of Incident:

## Animal Information

Type of Animal:

Owner's Name (if known):

Animal Description:

## Injury Information

Description of Injury:

First Aid/Treatment Given:

## Reporting Person

Name:

Contact Number: