

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-0036. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

OMB APPROVED
0579-0036

**UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
ANIMAL CARE**

ANIMAL WELFARE COMPLAINT

| | | |
|----------------|---------------|---------------|
| COMPLAINT NO.: | DATE ENTERED: | PROCESSED BY: |
|----------------|---------------|---------------|

| | |
|--------------|------------|
| REFERRED TO: | REPLY DUE: |
|--------------|------------|

FACILITY OR PERSON COMPLAINT FILED AGAINST

| | | |
|-------|---------------|--------------|
| NAME: | CUSTOMER NO.: | LICENSE NO.: |
|-------|---------------|--------------|

| | |
|----------|----------------|
| ADDRESS: | EMAIL ADDRESS: |
|----------|----------------|

| | | |
|-------|--------|----------------|
| CITY: | STATE: | TELEPHONE NO.: |
|-------|--------|----------------|

COMPLAINANT INFORMATION

| | |
|-------|---------------|
| NAME: | ORGANIZATION: |
|-------|---------------|

| | |
|----------|----------------|
| ADDRESS: | EMAIL ADDRESS: |
|----------|----------------|

| | | |
|-------|--------|----------------|
| CITY: | STATE: | TELEPHONE NO.: |
|-------|--------|----------------|

HOW WAS COMPLAINT RECEIVED?

DETAILS OF COMPLAINT:

RESULTS:

APPLICATION KIT PROVIDED:

YES NO

| | |
|------------|-------|
| INSPECTOR: | DATE: |
|------------|-------|

| | |
|--------------|-------|
| REVIEWED BY: | DATE: |
|--------------|-------|