



**FINANCE DEPARTMENT**  
**PURCHASING DIVISION**

100 TENTH STREET, COLUMBUS, GEORGIA 31901  
P. O. BOX 1340, COLUMBUS, GEORGIA 31902-1340  
706-225-4087, Fax 706-225-3033  
[www.columbusga.gov](http://www.columbusga.gov)

April 27, 2021

**ADDENDUM NO. 2**  
Animal Care and Control Services (Annual Contract)  
RFP No. 21-0034

**Proposals should include acknowledgement of receipt for all Addenda.**

**Initials: \_\_\_\_\_ Company Name: \_\_\_\_\_**

Vendors are informed that the above subject RFP is hereby modified, corrected, or supplemented as specified, described and set forth in this Addendum:

**QUESTIONS/RESPONSES**

- Question 1: Within RFP No 21-0034, it is noted that the salary of the Interim Director is not included. Is this salary paid by another department within the city? If not, please provide current salary and benefits for insurance purposes and proper budgeting.
- Response: The position is not identified as Interim Director and is not paid by another department within Columbus Consolidated Government. The position (and corresponding payroll information) is identified as the Interim "Division Manager (Vacant Position)" on page 2 of Addendum No. 1.**
- Question 2: Who is on the evaluation committee? Will the committee include individuals experienced with shelter operations and veterinary medicine such as Dr. Hank Hall? When do you anticipate making the final decision?
- Response: The Purchasing Division does not disclose the identities of members of the Evaluation Committee during an ongoing Request for Proposals (RFP) process. It typically takes approximately 6 - 8 weeks for an Evaluation Committee to complete its work. The Evaluation Committee's recommendation then must be presented to Columbus Council for approval, which may take an additional two (2) weeks.**
- Question 3: Please provide the total number of inmates who currently work for CACC. Please provide the number of hours weekly/monthly as well as their current job description.
- Response: Currently, there are two (2) inmates who each work 30-40 hours per week. The inmates' duties are to clean and disinfect all dog runs as often as needed to ensure cleanliness of all dog runs; clean all facility restrooms; empty the trash for all offices to**

include the breakroom; mop all floors; dust counter; wash windows; and all other duties as required by the Shelter Supervisor.

**Note: Inmates will not be allowed to work under the contract resulting from this RFP.**

Question 4: Please provide current expenses for subcontractor services, section F, [item] 7.

**Response: The current part-time veterinarian is required to come to the Animal Care and Control facility three (3) times per week. Upon receipt of monthly invoices, the veterinarian is paid \$125.00 per hour. Refer to Attachment A for sample copies of a Veterinary Service Sheet and invoice. Refer to the response to Question 5 for additional information.**

Question 5: Please provide budget and current expenses for all inventory listed under section F, [item] 10.

**Response: Refer to Attachment B for a listing of current medical supplies. A budget line-item does not exist for medical supplies. The current budget includes \$36,000 for the Veterinary Services, which pays for the medical supplies as well as the parttime veterinarian.**

Question 6: Please provide current operating procedures, forms regarding the required records and reports which must be kept – specifically found in RFP Section III Requirements, paragraph M, #2, 3, 4, 5, 6, 7, 15, 20, 21, and 22.

**Response:**

- **Written dispatch logs:**  
Refer to Attachment C, which is a sample copy of a Dispatch Log from the database of Columbus Consolidated Government.
- **Investigation reports:**  
Refer to Attachment D, which includes a sample copy of the form that is used as an Incident Report, Dangerous Animal Investigation, and Animal to Animal Exposure.
- **Animal bite cases:**  
Refer to Attachment E, which includes a sample copy of a Bite Report from the database of Columbus Consolidated Government and a sample letter from Columbus Consolidated Government.
- **Dangerous dog reports:**  
Refer to Attachment D for a copy of the form for Incident Report, Dangerous Animal Investigation, and Animal to Animal Exposure.
- **Rabies calls and cases:**  
Refer to Attachment F, which includes a copy of the Animal to Human Exposure Report, a Warning Code Violation form, and a summons to appear in Recorders Court.
- **Cruelty investigations:**  
Refer to Attachment G, which includes a sample copy of a Dispatch Log used to document the report of animal cruelty. The 2-page sample Dispatch Log includes comments and a description of action taken. The form is from the database of Columbus Consolidated Government and a sample letter from Columbus Consolidated Government.

- **Unpaid citations and collection documentation:**  
Recorders Court handles these issues and documents.
- **Notices of violations written, issued, outstanding and closed:**  
Refer to Attachment F, which includes a copy of the Animal to Human Exposure Report, a Warning Code Violation form, and a summons to appear in Recorders Court.
- **Hearings/court decisions/records:**  
The hearing dates are listed on the citations. Recorders Court handles the records related to the hearings and decisions.
- **Complaints:**  
Refer to the sample Dispatch Log (Attachment C).

Andrea J. McCorvey,  
Purchasing Division Manager



**ATTACHMENT A**

**Veterinary Service Sheet**

Date	Time In	Time Out	Service Provided	Veterinarian	Verified By
3-1-21	9:45		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-3-21	11:15		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3/5/21	9:45		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-7-21	8:25		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3/10/21	3:28		Vaccines + Paperwork	Henry J. Hall DVM	L. White
3-12-21	2pm		VACCINES & TRIAGE	Henry J. Hall DVM	L. White
3-15-21	5:00 PM		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-17-21	10:45		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3/19/21	10:15		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-22-21	9:20		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-24-21	9:20		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-26-21	10:15		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3-29-21	10:45		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White
3/31/21	11:50		VACCINES & PAPERWORK	Henry J. Hall DVM	L. White

# INVOICE 032021

Dr. Henry Hall  
 Veterinarian Services  
 161 Four Lot Rd  
 Hamilton GA 31811  
[sandy31811@gmail.com](mailto:sandy31811@gmail.com)  
 (706) 577-6561

**BILL TO:**  
 Columbus Consolidated  
 Government  
 Finance Department  
 P.O. Box 1340  
 Columbus, GA 31901

Date	Description	Rate
3/1/2021	Veterinarian Visit	\$125.00
3/3/2021	Veterinarian Visit	\$125.00
3/5/2021	Veterinarian Visit	\$125.00
3/7/2021	Veterinarian Visit	\$125.00
3/10/2021	Veterinarian Visit	\$125.00
3/12/2021	Veterinarian Visit	\$125.00
3/15/2021	Veterinarian Visit	\$125.00
3/17/2021	Veterinarian Visit	\$125.00
3/19/2021	Veterinarian Visit	\$125.00
3/22/2021	Veterinarian Visit	\$125.00
3/24/2021	Veterinarian Visit	\$125.00
3/26/2021	Veterinarian Visit	\$125.00
3/29/2021	Veterinarian Visit	\$125.00
3/31/2021	Veterinarian Visit	\$125.00
<b>Total</b>		\$1750.00

x Dr. Henry Hall

# ATTACHMENT B

## CURRENT MEDICAL SUPPLIES

1. 2 boxes – 5ml syringes
2. 1 box – 10ml syringes
3. 13 boxes – 3ml syringes w/needle
4. 9 boxes – 18g x1
5. 6 boxes – 25g x 5/8
6. 4 boxes – 20g x 1 ½
7. 9 boxes 20g x 1
8. 2 bottles dexamethasone 100 ml
9. 1 bottle meloxicam 7.0 mg
10. 1 bottle carprofen 100mg
11. 1 bottle ketalog 50mg
12. 4 bottles euthasol 100 ml
13. 4 bottles xylazine 100 ml
14. 15 bottles ketamine 10 ml
15. 1 bottle cephalexin 500 mg
16. 2 bottles chlorpheniramine maleate tablets 4mg
17. 2 bottles fatal plus powder 250 ml
18. 2 bottles penicillin 250 ml
19. 2 bottles pencicillin 100 ml
20. 7 boxes rabies vaccine – 50 ct
21. 8 boxes Bordetella vaccine - 25 ct
22. 5 boxes da2pp + lepto vaccine 25 ct
23. 15 boxes fvrcp vaccine 25 ct
24. 7 boxes da2pp vaccines 25 ct
25. 2 bottles doxycycline hyclate 100 mg
26. 1 bottle amoxicillin 250 mg capsules
27. 1 bottle amoxicillin 500 mg capsules
28. 18 boxes nexgard flea & tick 24 – 60 lb
29. 1 box revolution cat flea & tick 15 – 22 lb
30. 10 boxes provecta flea & tick 50 – 110 lb
31. 5 boxes microscope slides
32. 4 boxes microscope slide covers
33. 2 bottles of fecal flotation device
34. Microscope
35. Large dog scale

# Dispatch Log

Time Recorded	07:16 AM	Time Dispatched	07:18 AM	Time Arrived	
Unit Status	10-97 / 8:35:00 AM 10-8 / 8:40:00 AM				

Entered by

Log ID	AMEL-C2EF8V				
Date	04/25/2021				
Code	Code 1 - Animal in Trap	Type Call	Raccoon		
Desc		North/South	1777		

Followup  Yes  No  
 Date

House #	00000	Dir		Street Name	John Smith	Ln
House 2	00000	Dir		2nd Street Name		
Additional Info						

Apt Type   
 Cross Street &

Submitted by			
First Name	Last	MI	Title
Area Code + Phone		706	

First Name	Last	MI	Title
Lisa	Doe		
Area Code + Phone		706324-0000	

Supervisor Unit   
 Officer Name

Comments

Action	Impoundment
Animal Type	Raccoon
Total	1

# ATTACHMENT D

INCIDENT REPORT ( ) DANGEROUS ANIMAL INVESTIGATION ( ) ANIMAL TO ANIMAL EXPOSURE ( )

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ OFFICER: \_\_\_\_\_ UNIT #: \_\_\_\_\_

### PLAINTIFF OR VICTIM INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Zip: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

PLAINTIFF OR VICTIM WANTS TO FILE CHARGES ( ) YES ( ) NO

### PLAINTIFF ANIMAL INFORMATION

NAME: \_\_\_\_\_ BREED: \_\_\_\_\_ COLOR: \_\_\_\_\_ SEX: \_\_\_\_\_

RABIES #: \_\_\_\_\_ CITY PERMIT#: \_\_\_\_\_ DATE EXPIRE: \_\_\_\_\_

PLAINTIFF OR WITNESS STATEMENT: NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

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### DEFENDANT INFORMATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Zip: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

### DEFENDANT ANIMAL INFORMATION

NAME: \_\_\_\_\_ BREED: \_\_\_\_\_ COLOR: \_\_\_\_\_ SEX: \_\_\_\_\_

RABIES #: \_\_\_\_\_ CITY PERMIT #: \_\_\_\_\_ DATE EXPIRE: \_\_\_\_\_

DEFENDANT OR WITNESS STATEMENT: NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

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CONTINUED ON BACK SIDE

COLUMBUS POLICE OFFICER: NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACTION TAKEN BY INITIATING OFFICER OR FOLLOW-UP OFFICER: \_\_\_\_\_ UNIT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_

RECOMMENDED CLASSIFICATION      DANGEROUS ( )      VICIOUS ( )

COMMENTS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

# Bite Report

Officer

Disposition	Returned to owner	Quarantined at ACC	<input checked="" type="radio"/> No <input type="radio"/> Yes
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Date of Entry	01/24/2013	Collar	
Breed	American Bull Dog	Color	BROWN
Mixed	<input type="radio"/> Yes <input checked="" type="radio"/> No	Guard Dog	<input type="radio"/> Yes <input checked="" type="radio"/> No
Euth Date		Bite?	<input checked="" type="radio"/> Animal to Human <input type="radio"/> Animal to Animal
Prev Bite	<input type="radio"/> Yes <input checked="" type="radio"/> No		

Pet Name	Bobo
Comment	

Owner First Name	John	Owner Last Name	Doe	M	Title	
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House #	12345	Dir		Street Name	Any	Rd
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Apt Type		Apt No	
City	Columbus	State	GA
Zip		Date of Death	
Home Phone	706	Relocation Date	
Work Phone	706	Cell Phone	706

Officer	Allen - 70
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Officer 1 Comments	Officer Allen stated the dog was very aggressive when he got on the scene with C.P.D.he stated they had the dog in the police car and he had a hard time getting him out.
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Officer 2	
Officer 2 Comments	

Officer 3	
Officer 3 Comments	

Victim First Name	Lisa	Last Name	Doe	MI	Title
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House #	55555	Dir		Street Name	Anywhere	Rd
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Apt Type		Apt No	
City	Columbus	State	GA
Zip			
Home Phone	706	Cell Phone	706
Work Phone	706		

Statement Date	01/24/2013
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Victim Statement	
Animal to Human Exposure	 GSTT-97RRHR.doc  My family and I was running my son was running out in front of my wife and I the man across the s his dog on a leash and got loose the dog jumped on my youngest son and attached him wouldnt g pulled him off.

Field Supervisor

Classified	<input type="radio"/> No <input checked="" type="radio"/> Yes
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Dangerous / Vicious Animal Investigation	Officer stated that the dog was very aggressive, that it took part of the victim ear off.
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Shelter Supervisor

Supervisor	Stewart - 77
Comments	During my investigation I observed the dog (Bo Bo) to be very aggressive toward people when they would approach the run you could not get close to him while he was at the animal control center, and when Mr. Martin came to pick him up he had a hard time controlling him the dog almost pull him down dragging him to the car. One more thing to add is the child (Jacob) is going to have to have several surgeries on his left ear to get it back to normal.
Assessment of Animal at ACC	In my early statement this dog is very aggressive he showed no fear toward anyone, you could not get close to the run before he would start biting the gate.
Classification Justification	

Admin Supervisor

Email History

Admin Supervisor Comments

Other Attachment

 Elbert Martin Reminder Renewal 2015.pdf
  Renewal 2014 Elbert Martin Dangerous Dog.txt.pdf  
 elbert martin pictures.pdf
  20131203120514774.pdf
  ACAB Minutes Feb 26, 13.doc

Veterinarian

Attach Veterinarian Documents

Veterinarian Comments

Veterinarian Attachment



# Columbus, Georgia

Georgia's First Consolidated Government  
P. O. Box 1340 Columbus, Georgia 31902-1340

Department of Public Services  
Special Enforcement Division

Telephone (706) 653-4512  
FAX (706) 225-4974

Date

Dog Owner Name  
Address  
City, GA

Dear Dog Owner:

This is to notify you that your dog, TYPE, SEX named NAME has been classified as “**Dangerous**” as defined Under Georgia State Law, O.C.G.A. 4-8-27. This determination is based on the investigation of a biting incident that occurred on **DATE**, . Following interviews with you, the victim, and witnesses (if any), the Animal Control Supervisor has concluded the bite was unprovoked.

If you disagree with this classification, you may request a hearing within **fifteen (15) days** of the date of this letter. Members of the Animal Control Advisory Board will conduct the hearing. If a hearing is not requested, the classification of your animal, as “Dangerous” will become effective immediately. At this time, you will be requested to comply with this Georgia State Law, specifically, Section 54-8-27 (a) through (g) (copy enclosed). You should also be familiar with the further responsibilities of owning a classified dog set for the in O.C.G.A. Sections 4-8-28 and 4-8-29.

Under this classification the following requirements will have to be met in order to have your animal remain with you. Under Georgia State Law, O.C.G.A 4-8-27 it states:

- (a) It shall be unlawful for an owner to have or possess within this state a classified dog without a certificate of registrations issued in accordance with the provisions of this Code Section. Certificates of registration shall be non-transferable and shall only be issued to a person 18 years of age or older. No more than one certificate registration shall be issued per domicile.
- (b) Unless otherwise specified by this code section, a certificate of registration for a dangerous dog shall be issued if the dog control officer determines that the following requires have been met:
  - (1) The owner has maintained an enclosure designed to securely confine the dangerous dog on the owner’s property, indoors, or in a securely locked and enclosed pen, fence, or structure suitable to prevent the dangerous dog from leaving such property; and
  - (2) Clearly visible warning signs have been posted at all entrances to the premises where the dog resides.

- (3) A **microchip** containing an identification number and capable of being scanned has been injected under the skin between the shoulder blades of the dog; and
- (4) The owner maintains and can provide proof of general or specific liability insurance in the amount of at least **\$50,000.00** issued by an insurer authorized to transact business in this state insuring the owner of the dangerous dog against liability for any bodily injury or property damage caused by the dog.

The enclosed Hearing Request Form must be completed and mailed by Certified Mail, or hand-delivered, to Animal Control Division, 4910 Milgen Rd. Columbus, Ga. 31907. A hearing will be scheduled within **thirty (30) days** of the receipt of your request; and you will be notified of the date, time, and place at least **ten (10) days prior**.

Should you have any questions regarding this classification, please contact this office. Please call this office if you require assistance or have any questions.

Respectfully,

Interim Division Manager  
Department of Public Works  
Animal Care & Control Division

C: Animal Control Advisory Board Members  
Director of Public Works  
Deputy Director of Public Works

HAND DELIVERED or  
CERTIFIED MAIL

X \_\_\_\_\_  
Signature/Date

	<i>Classified Animal Check List</i>		<i>Administrative List</i>
<input type="checkbox"/>	<i>Activity Reports</i>	<input type="checkbox"/>	<i>Classification Letter</i>
<input type="checkbox"/>	<i>Bite Reports/Incident Reports (Signed)</i>	<input type="checkbox"/>	<i>Hearing Request</i>
<input type="checkbox"/>	<i>Impoundment Cards</i>	<input type="checkbox"/>	<i>Hearing Notification</i>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<i>Pictures</i> <ul style="list-style-type: none"> <li>• <i>Dog/Cat</i></li> <li>• <i>Victims</i></li> <li>• <i>Injuries</i></li> <li>• <i>Property</i></li> </ul>	<input type="checkbox"/>	<i>Certified Mail Receipts</i>
<input type="checkbox"/>	<i>Police Reports</i>	<input type="checkbox"/>	<i>Shelter Supervisor Assessment</i>
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<i>Statements/Assessments</i> <ul style="list-style-type: none"> <li>• <i>Victims</i></li> <li>• <i>ACC Supervisor</i></li> <li>• <i>Shelter Supervisor</i></li> <li>• <i>ACC Officers</i></li> </ul>		

# ATTACHMENT F

**COLUMBUS ENVIRONMENTAL HEALTH**  
A Division of the Columbus Department of Public Health  
**Serving the Residents of Columbus, Talbot, Chattahoochee, and Marion County**  
**ANIMAL TO HUMAN EXPOSURE REPORT**

Date of Report: \_\_\_\_\_ Time: \_\_\_\_\_ ACO #: \_\_\_\_\_ Name: \_\_\_\_\_ Recorded Form: \_\_\_\_\_

**V** Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_\_\_  
**I** Parents/Guardian (if minor): \_\_\_\_\_ Race: \_\_\_\_\_ Ethnicity: \_\_\_\_\_  
**C** Address: \_\_\_\_\_ Apt. \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
**T** Home: \_\_\_\_\_ Work: \_\_\_\_\_ Ext: \_\_\_\_\_ Cell: \_\_\_\_\_  
**I** #  
**M**

**O** Name: \_\_\_\_\_  
**W** Address: \_\_\_\_\_ Apt. \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_  
**N** Home: \_\_\_\_\_ Work: \_\_\_\_\_ Ext: \_\_\_\_\_ Cell: \_\_\_\_\_  
**E**  
**R**

**E** Date of Exposure: \_\_\_\_/\_\_\_\_/\_\_\_\_ Address Where Exposed: \_\_\_\_\_  
**X** Type of Exposure: \_\_\_\_ Bite \_\_\_\_ Scratch \_\_\_\_ Puncture \_\_\_\_ Severe Part of Body Exposed: \_\_\_\_\_  
**P** Time of Bite: \_\_\_\_\_ Victim was treated at: \_\_\_\_\_ Sutures required: \_\_\_\_\_  
**O**  
**S**  
**U**  
**R**  
**E**

STATEMENT

How did bite occur? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby affirm that the animal listed on this report did bite/scratch me and break the skin. I also hereby affirm that all information given is true and correct to the best of my knowledge.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_ Dog \_\_\_\_ Cat \_\_\_\_ Other Breed: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
\_\_\_\_ Pet \_\_\_\_ Stray \_\_\_\_ Wild Age of animal: \_\_\_\_\_ Description: \_\_\_\_\_ Name: \_\_\_\_\_

Vaccinated: \_\_\_\_ Yes \_\_\_\_ No Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Rabies tag number: \_\_\_\_\_ City Permit Number: \_\_\_\_\_ Veterinarian: \_\_\_\_\_

Is animal known to have bitten others? \_\_\_\_ Yes \_\_\_\_ No (\_\_\_\_ Provoked \_\_\_\_ Unprovoked)

Victim wishes to press charges at this time: \_\_\_\_ Yes \_\_\_\_ No Signature: \_\_\_\_\_

Court Date: \_\_\_\_\_ Charges: \_\_\_\_\_

Quarantine begins: \_\_\_\_/\_\_\_\_/\_\_\_\_ Quarantine ends: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Animal Quarantined: \_\_\_\_/\_\_\_\_/\_\_\_\_

Quarantine at: \_\_\_\_ Acc (Tag # \_\_\_\_\_) \_\_\_\_ Home \_\_\_\_ Vet (Name \_\_\_\_\_)

Classified: \_\_\_\_ Yes \_\_\_\_ No Supervisor Initials \_\_\_\_\_

**A**  
**N**  
**I**  
**M**  
**A**  
**L**

CONSOLIDATED GOVERNMENT OF COLUMBUS, GEORGIA  
DEPARTMENT OF SPECIAL ENFORCEMENT

WARNING CODE VIOLATION

TO: \_\_\_\_\_  
Last First Middle

Business Name \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address

\_\_\_\_\_ City State Zip

**FAILURE TO COMPLY WITH  
THIS WARNING WITHIN \_\_\_\_\_  
DAYS COULD RESULT IN A  
SUMMONS TO COURT.**

Code Section Violation

Code Section Violation

Recommendation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By: Officer \_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Time: \_\_\_\_\_

**NOTE:  
Please call 653-4512 for information or  
assistance.**



# Dispatch Log

Time Recorded	06:10 PM	Time Dispatched		Time Arrived	
Unit Status	10-97 / 6:29:00 PM 10-8 / 6:52:00 PM				

Entered by

Log ID	JVEZ-BZZTZV				
Date	04/12/2021				
Code	Check 5-12 - Cruelty			Type Call	
Desc				North/South	1776

Followup	<input type="radio"/> Yes <input checked="" type="radio"/> No				
Date					

House #	12354	Dir		Street Name	Any	Ave
House 2	00000	Dir	E	2nd Street Name		
Additional Info						

Apt Type			
Cross Street	&		

Submitted by			
First Name	Last	MI	Title
Area Code + Phone	706		

First Name	Last	MI	Title
Area Code + Phone	706		

Supervisor Unit	
Officer Name	Velazquez- 76

Comments	<p>Upon arrival observed one dog in kennel on side of property, no food/water and no proper shelter. No answer at door. Left door hanger advising neglect, no food/water, no shelter, improper tethering.</p> <p>Had Ofc. Tackett 9010 with me- unable to open kennel door without dog lunging. While on scene dog owners neighbor came over and told us that the owner was at work and we couldnt take their dog. I advised the dog cannot stay in the kennel and he stated that his kids are the ones who put princess in the kennel because she got off her tether. There was no tethering system in the yard where the dog lives and according to the witness the dog has been in the kennel for multiple days. Impounded dog "Princess" for her wellbeing as she was in a wire crate with no protection from the elements and had no food or water available.</p>
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Action	Impoundment
Animal Type	Dog
Total	1