



Your Ref

Our Ref

Date

Please ask for

Phone

Fax 01394 385100

email [environment@eastsuffolk.gov.uk](mailto:environment@eastsuffolk.gov.uk)

Dear

### **DOG FOULING INCIDENT - SUMMARY OF WITNESS INFORMATION**

You have recently reported a dog fouling incident. We appreciate you telling us about this problem. We're committed to maintaining clean and safe public spaces and need your support to make this happen.

We would like to know more about what you saw, and what you can tell us about the incident, so that we can consider the most appropriate action to take.

#### **What action will we take?**

If you can provide us with detailed information about what happened we may wish to warn or prosecute the offender/s. Unfortunately if you don't have some key information, we may not be able to act on this occasion.

The form accompanying this letter helps us quickly see if we can take action. If we believe you can offer enough information to make prosecution possible we'll be back in touch to see if you would be willing to give this information to a court. If you would, we'll explain further what we need you to do.

If you cannot provide more detailed information then you do not need to do anything else. We have recorded the details of your complaint and passed details to the cleansing team. We also use this information to build up a picture of the overall problem across the District and direct our resources appropriately.

Thank you for your assistance.

Yours sincerely

#### **Environmental Health**

Council Offices, Melton Hill, Woodbridge, Suffolk IP12 1AU  
**Telephone:** (01394) 444624 **DX:** Woodbridge 41400





## Dog Fouling Incident Witnessed By Member Of Public Summary Of Witness Information

Summary:	
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Your Details	
Your Full Name	
Your Address	
Your Phone Number	
Our Reference:	

What You Saw	
Date and Time of incident	Date: _____ Time: _____
The weather conditions at the time <ul style="list-style-type: none"> <li>Was it day light, after dark, was visibility good, or poor – perhaps due to rain or snow.</li> <li>Could you easily see what happened</li> </ul>	
Location <ul style="list-style-type: none"> <li>Where did the incident occur?</li> </ul>	
How far away were you from the incident at the time?	
Describe the person responsible <ul style="list-style-type: none"> <li>Man or woman?</li> <li>Do you know their name?</li> <li>Their approximate age?</li> <li>Any other features you remember: hair colour, glasses, clothing etc?</li> </ul>	
Address of person responsible? <ul style="list-style-type: none"> <li>Do you know where they live?</li> </ul>	

Description of the dog/s (size / colour / breed / gender)	
Did you speak to the person who allowed their dog to foul? <ul style="list-style-type: none"> <li>If so, what did they say?</li> </ul>	
Did you see the person who did not clear up after their dog get into a vehicle? <ul style="list-style-type: none"> <li>If so what make / model colour etc</li> </ul>	
Other witnesses <ul style="list-style-type: none"> <li>Did anyone else see what happened? How could we contact them?</li> </ul>	
Comments / Remarks <ul style="list-style-type: none"> <li>Anything else you want to tell us, which you think may help?</li> </ul>	
Please confirm that the details you have completed above are correct and that you are willing to attend Court and act as a witness for Waveney District Council by signing and dating this form	Signed:  Date:

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Please return the completed form to:

Environmental Protection Team  
Suffolk Coastal District Council  
Melton Hill  
Woodbridge  
Suffolk IP12 1AU