



HURON COUNTY GENERAL HEALTH DISTRICT

Timothy Hollinger, MPH, Health Commissioner

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419-668-1652 or 1-888-694-2443 Toll-Free
419-668-5423 General Fax
419-660-0129 Environmental Health Fax

REPORT OF ANIMAL BITE

OWNER

Name: _____ Phone #: _____
Mailing address: _____
SS#: _____

ANIMAL

Name: _____ Species: _____
Breed(s): _____ Color(s): _____
Sex, if known? M F Immunized against Rabies? No Yes
Neutered/Spayed? No Yes If Yes, name of Vet/Clinic _____
Previous Bites? No Yes Date given: _____ Rabies Tag No. _____
Type of shot: () 1 year () 3 year

VICTIM

Victim Name: _____ Date of Incident: _____
Parents' Name: _____ Age: _____
Mailing address: _____ Phone: _____

Circumstances of Bite: _____

TREATMENT

Area bitten and degree: _____
Treatment rendered: _____
Physician _____ Date _____

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- *If a domestic animal, it must be quarantined for 10 days. The Health Department will contact the owner with additional information upon receipt of the report.*
 - *The animal is not to be sold, transferred, or moved from the county until released from quarantine.*
 - *If a wild animal, it must be humanely killed without damaging the head area. The head must be removed and refrigerated (not frozen) until it can be brought to the Environmental Division of the Health Dept.*
 - *The Health Department does not have the facilities to capture or hold animals.*