

Ranger Job Request

KOORDA

Complaint No: _____ 10/11

RANGER DEPARTMENT USE ONLY - CLASSIFICATIONS

AV Abandoned Vehicles	CP Camping	DG Dog General	DB Dog Barking	DA Dog Attack	F Fire	GL General Law	L Litter	ORV Off Road	P Parking	R Reserves	S Stock
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DATE: ____/____/____ TIME: _____ OFFICER: _____

COMPLAINANT: _____

ADDRESS: _____

PHONE: (H) _____ (W) _____ (F) _____

LOCATION OF PROBLEM: _____

COMPLAINT DETAILS: _____

VEHICLE: Rego: _____ Make/Model: _____ Colour: _____
(See reverse for further details)

DOG BREED: (if known) _____ Colour: _____ Sex: _____ Rego: _____

NAME OF ACCUSED/OWNER/OCCUPIER (if known): _____

DOG RESIDES AT: _____

MICRO CHIP: _____ PHOTO:

OFFICE HOURS

AFTER-HOURS

FIELD

Kennel No. _____

IMP NO. _____

DATE	TIME		RANGER	RESULTS/ACTION TAKEN
	From	To		

File Closed Ranger's Signature: _____ Date: ____/____/____

SYNERGY VEHICLE IMPOUND NO.: _____

Police Check Carried Out: Date: ____/____/____ Stolen: Yes/No
Involved in Offence: Yes/No

Owner Details Obtained: Yes/No

Vehicle Chalked: Date: ____/____/____ Time: ____:____ am/pm

Vehicle Removal Notice Affixed: Date: ____/____/____ Time: ____:____ am/pm

Vehicle Rechecked: Date: ____/____/____ Time: ____:____ am/pm

Vehicle Removed from Area: Yes/No

Chalk Marks Clearly Visible: Yes/No

Vehicle Tow Organised: Date: ____/____/____ Time: ____:____ am/pm

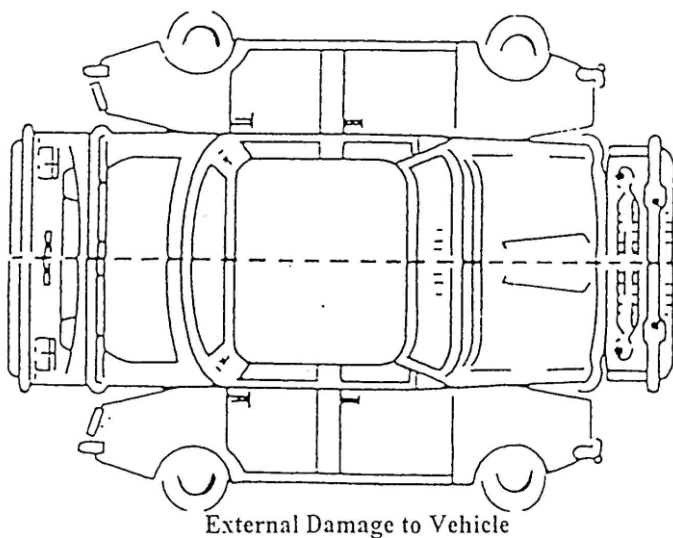
Towed by: _____ Requisition No. _____

Vehicle Towed To: Depot or Specify Other _____

VEHICLE CHECK

- | | | | |
|-------------------------------|--------------------------|----------------------|--------------------------|
| 1. Radio/Cassette Combination | <input type="checkbox"/> | 5. Wheels on Vehicle | <input type="checkbox"/> |
| 2. Radio | <input type="checkbox"/> | 6. Doors Secure | <input type="checkbox"/> |
| 3. Cassette | <input type="checkbox"/> | 7. Boot Secure | <input type="checkbox"/> |
| 4. CD Player | <input type="checkbox"/> | 8. Ignition | <input type="checkbox"/> |

Valuables visible in vehicle: _____



Comments: _____

Ranger's Signature: _____ Date: ____/____/____