

**Wayne County Health Department**  
**Environmental Health Division 428 W. Liberty St. Wooster, OH 44691**

**330-264-2426 Phone 330-262-8433 Fax**

All animal bite and exposure incidents must be reported within 24 hours,  
per Ohio Administrative Code (OAC) 3701-3-28

**Email or Fax completed form**

**330-262-8433 ehinfo@wayne-health.org**

Date of Bite:	Date reported/Date of Treatment:
Address where the Bite incident occurred:	

### **Victim Information**

Name of person Bitten:	Age:
Name of Parent if Minor:	Relationship:
Address:	Phone #: Alt. Ph#:
City:	State: Zip Code:
Type of exposure: Bite Scratch If Other, please describe:	
Name of Medical Provider:	Phone # of Medical Provider:
Location of Injury, Description of what happened:	

### **Animal & Owner information**

Owner's name:	Phone #:
	Alternative Phone #:
Address:	City: State: Zip code:
Animal Species: Dog Cat	Breed: Type of Animal:
Other:	Pet Stray Wild
Animal name:	Male Female Spayed/Neutered: Yes No Unknown
	Animal Color & Description:
Rabies Tag #:	Date of Vaccination: Type of Vaccination: 1-Year 3-Year Unknown
Name of Vet Clinic where vaccine was given or current Vet:	
Phone #:	Where is the animal now?