



Maple Ridge

Dog Incident Statement

Today's Date:

Statement Provider Information

Name	
Home Address	
Email Address	
Phone Number	
What was your involvement in the incident?	

Incident Details

Date & Time of incident	
Location of incident	
Details of incident	

Description of Dog(s) Involved

Breed (if known)	
Colour	
Name	
Gender	
Other Details	

Dog(s) Injury Details

Description of Injuries

City of Maple Ridge

11995 Haney Place, Maple Ridge, BC V2X 6A9

Tel: 604-467-7305 Tel: 604-467-7384 Fax: 604-467-7445

Updated Apr 2025

Email inquiries: dogs@mapleridge.ca

Web Site: mapleridge.ca



Maple Ridge

Dog Incident Statement

Injured Person Details (if applicable)

Name	
Home Address	
Email Address	
Phone Number	
Description of injuries	

Medical Assistance Information (if applicable)

Details of care provided (veterinary information, doctor information, first aid provided, etc.)

Additional Details

Provide any additional details that may be relevant to this incident

Evidence – Email any incident related photos to bylaws@mapleridge.ca

Form Completed by PLEASE PRINT	
Date of Submission	
Signature	

I swear under penalty of perjury that the information I have provided is true and accurate to the best of my knowledge, information and belief.