



**COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH
VETERINARY PUBLIC HEALTH PROGRAM**

313 N. Figueroa St, #1127, Los Angeles, CA 90012
Tel: (213) 288-7060 email: vet@ph.lacounty.gov
Hours: Monday - Friday 8am to 5pm
website: www.publichealth.lacounty.gov/vet



BAT SUBMISSION FORM

INSTRUCTIONS:

- All bats submitted to animal shelters/veterinary clinics must be reported to Public Health immediately. Complete form with as much information as possible.
- DO NOT DECAPITATE bat specimen.
- Refrigerate bat after it is deceased. DO NOT FREEZE.

1. **Reporting Agency.** Shelter/Clinic Name _____

Phone _____ Date bat reported to Public Health _____

Staff member / ACO _____ Bat Impound # _____

2. **Person who found the bat.** Name _____ Phone _____

3. **When / where was the bat found?** Date bat found _____

Name of business (if applicable) _____

Address _____

Type of location where bat found (check one):

- Home Park Camp
 Business School Other: _____

4. **Details of bat encounter.** Describe how the bat was found, and where on the property _____

Was the bat found (check one) Indoors* or Outdoors?

Time of capture/pickup _____ Method used to capture bat _____

When captured, was the bat (check one) Alive** or Dead?

5. **Contact with bat.** Did any people or animals have potential physical contact with bat?
(check one) Yes* No Unknown

**List all persons and pets that had direct contact with the bat or that were indoors with the bat.*

Names:	Addresses:	Phone:

**List any shelter/clinic staff who had contact with the bat (e.g. during euthanasia, if applicable)

Name(s): _____ Phone: _____