

THE GOVERNING COUNCIL OF THE CAT FANCY

5 Kings Castle Business Park
 The Drove
 Bridgwater TA6 4AG
 Tel: 01278 427 575 Fax: 01278 446 627
 Web: www.gccfcats.org email: info@gccfcats.org

**I.C.FORM 4 – SALE OF A SICK/UNVACCINATED CAT/KITTEN**

Your details:

Please enclose £15 Administration Fee with this form

NAME:		PREFIX:	
ADDRESS:			
TEL NO:		E-MAIL:	

I wish to bring a complaint against:

NAME:		PREFIX:	
ADDRESS:			
TEL NO:		E-MAIL:	

NAME OF CAT (give Pedigree and pet name)	
DATE OF BIRTH	REGISTRATION NUMBER
DATE OF PURCHASE	
DATE FIRST NOTED TO BE UNWELL	
DATE FIRST SEEN BY A VET	
DIAGNOSIS	
DO YOU HAVE ANY OTHER CATS IF SO HOW MANY?	

Details of Complaint (1 additional sheet may be used):

PTO: Continue over if required
 Please sign overleaf

THE GOVERNING COUNCIL OF THE CAT FANCY

5 Kings Castle Business Park

The Drove

Bridgwater TA6 4AG

Tel: 01278 427 575 Fax: 01278 446 627

Web: www.gccfcats.org email: info@gccfcats.org



I.C.FORM 4 – SALE OF A SICK/UNVACCINATED CAT/KITTEN - Continued

PLEASE PROVIDE: 1) Copies of all paperwork received when purchased, 2) Vaccination Certificate, 3) Full written veterinary statement as well as summary of veterinary treatment, 4) Name and Address of any witnesses, 5) any other relevant documents (please list).

Declaration:

I/WE FURTHER AGREE TO ACCEPT AS FINAL ANY DECISION MADE BY THE GCCF INVESTIGATION COMMITTEE REGARDING THIS COMPLAINT.

I/We note and accept Article 12(3)(d) of the GCCF Byelaws

I/We understand should a case be preferred to the GCCF Disciplinary Committee, the meeting will be held in London, the time and place to be notified at a later date.

Signed:

Date:

For office use only:

IC Ref No:

Documents provided:

Documents requested: