



DEPARTMENT OF  
**NEIGHBORHOOD SERVICES**  
milwaukee.gov/DNS

# ANIMAL BITE RECORD

#ENF Ac-25-00296 DNSP Rzepkowski/Dutmer

Animal Owner Robert Cagle Address 1957 N. 36<sup>th</sup> St Zip 53208

Date of Birth 10-12-81 Phone No. (home) 414-544-0120 (work) \_\_\_\_\_

Reported by ☒ 1 Citizen ☒ 2 Police ☐ 3 Hospital ☐ 4 Physician ☐ 5 MADACC ☐ 6 Other \_\_\_\_\_

Person Bitten Tai Shan James Date of Birth 3-14-120

Sex M Parent/Guardian if minor \_\_\_\_\_

Address 1957 N. 36<sup>th</sup> St Zip \_\_\_\_\_ Phone No. (home) 414-544-0120 (work) \_\_\_\_\_

Victim notified to contact physician Yes ☐ No ☐ Date of Bite 3-6-25

Rabies vaccination status Current ☐ None ☐ Unknown ☐

Tag No. \_\_\_\_\_ Vaccination Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Is animal quarantined Yes ☒ No ☐ If yes, location Home

Animal Type ☒ 1 Dog ☐ 2 Cat ☐ 3 Other \_\_\_\_\_

How Bite Occurred ☐ 1 Provoked ☐ 2 Unprovoked ☐ 3 Playful ☐ 4 Unknown ☐ 5 Conflicting Statements

Wound Location (specify) Several bite puncture wounds

Name of Animal Ghost License No. \_\_\_\_\_

Breed Cane Corso Color Brindle Age 15 Months Sex M

Initial Inspection Date <u>3/7/25</u>	Reinspection Date <u>3/11/25</u>	Reinspection Date <u>3/20/25</u>	Reinspection Date _____
Handouts <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Units <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activity <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Time (Min) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insp. ID _____	_____	_____	_____

Comments \_\_\_\_\_

## Handouts

1-Educational Material; 2-License Application; 3-Educational Material & License Application

**Activity** 4 - Quarantine at Home; 5 - No Contact DNS 393; 6 - No Contact DNS 72; 7 - Conference; 8 - Quarantine Release; 9 - Notified Person Bitten; 10 - Inspect-Not Actionable; 11 - License/Rabies Vaccination Enforcement; 12 - Quarantine at MADACC; 13 - Interim Inspection; 14 - Other Enforcement; 15 - Referred; 16 - Animal Lab Test; 17 - Recommend MD Treatment Letter; 18 - Citation Issued; 19 - Other.

1957 N. 36<sup>th</sup> St



DEPARTMENT OF  
**NEIGHBORHOOD SERVICES**  
milwaukee.gov/DNS

**ANIMAL BITE RECORD**

#ENF AC 23 <sup>00297</sup> ~~00289~~ INSP Rzepkowski / Dutmer

Animal Owner Robert Cagle Address 1957 N. 36<sup>th</sup> St Zip 53208

Date of Birth 10-12-81 Phone No. (home) 414-544-0120 (work) \_\_\_\_\_

Reported by ☒ 1 Citizen ☒ 2 Police ☐ 3 Hospital ☐ 4 Physician ☐ 5 MADACC ☐ 6 Other \_\_\_\_\_

Person Bitten Shaliah Cagle Date of Birth 4 128 109

Sex F Parent/Guardian if minor \_\_\_\_\_

Address 1957 N. 36<sup>th</sup> St Zip \_\_\_\_\_ Phone No. (home) 414-406-1105 (work) \_\_\_\_\_

Victim notified to contact physician Yes ☐ No ☐ Date of Bite 3.6.25

Rabies vaccination status Current ☐ None ☐ Unknown ☐

Tag No. \_\_\_\_\_ Vaccination Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Is animal quarantined Yes ☒ No ☐ If yes, location Home

Animal Type ☐ 1 Dog ☐ 2 Cat ☐ 3 Other \_\_\_\_\_

How Bite Occurred ☐ 1 Provoked ☐ 2 Unprovoked ☐ 3 Playful ☐ 4 Unknown ☐ 5 Conflicting Statements

Wound Location (specify) Minor bite Puncture Wounds

Name of Animal Gloss License No. \_\_\_\_\_

Breed Cane Corso Color Brindle Age 15 months Sex M

Initial Inspection  
Date 3/7/25

Handouts ☐

Units ☐

Activity ☒ 4

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Time (Min) ☐

Insp. ID \_\_\_\_\_

Reinspection  
Date 3/11/25

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Reinspection  
Date 3/20/25

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Reinspection  
Date \_\_\_\_\_

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Comments \_\_\_\_\_

**Handouts**

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1957 N. 36<sup>th</sup> St



DEPARTMENT OF  
**NEIGHBORHOOD SERVICES**  
milwaukee.gov/DNS

**ANIMAL BITE RECORD**

#ENF Ar 25-00298 INSP Zepkowski/Dutner

Animal Owner Robert Cagle Address 1957 N. 36<sup>th</sup> St Zip 53208

Date of Birth 10-12-81 Phone No. (home) 414.544.0120 (work) \_\_\_\_\_

Reported by ☒ 1 Citizen 2 Police 3 Hospital 4 Physician 5 MADACC 6 Other \_\_\_\_\_

Person Bitten Kimora Cagle Date of Birth 9/10/10

Sex F Parent/Guardian if minor \_\_\_\_\_

Address 1957 N. 36<sup>th</sup> St Zip \_\_\_\_\_ Phone No. (home) 262.693.0788 (work) \_\_\_\_\_

Victim notified to contact physician Yes ☐ No ☐ Date of Bite 3.6.25

Rabies vaccination status Current ☐ None ☐ Unknown ☐

Tag No. \_\_\_\_\_ Vaccination Date \_\_\_\_\_ Expiration Date \_\_\_\_\_

Is animal quarantined Yes ☒ No ☐ If yes, location Home

Animal Type ☐ 1 Dog 2 Cat 3 Other \_\_\_\_\_

How Bite Occurred ☐ 1 Provoked 2 Unprovoked 3 Playful 4 Unknown 5 Conflicting Statements

Wound Location (specify) Minor bite Puncture Wound

Name of Animal Ghost License No. \_\_\_\_\_

Breed Cane Corso Color Brindle Age 15 Months Sex M

Initial Inspection  
Date 3/7/25

Handouts ☐

Units ☐

Activity ☒

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Time (Min) ☐

Insp. ID \_\_\_\_\_

Reinspection  
Date 3/11/25

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Reinspection  
Date 3/20/25

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Reinspection  
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Comments \_\_\_\_\_

**Handouts**

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V-I Rev. 03/04

# MILWAUKEE POLICE DEPARTMENT

## VICIOUS ANIMAL REPORT

District 3Date March 6<sup>th</sup> 2025Taijuan C. James

Name of person injured

914-544-0120

Phone

3-4-20

D.O.B.

M

Sex

1957 N. 36<sup>th</sup> St Milwaukee, Wisconsin, 53208

Address

1957 N. 36<sup>th</sup> St. Milwaukee, Wisconsin, 53208

Place of occurrence

3-6-25

Date

10:10

Time

Several bite puncture wounds / require stitches.

Extent of injuries

Robert L. CAGLE

Name of owner of dog

914-544-0120

Phone

10/12/81

D.O.B.

1957 N 36<sup>th</sup> St.

Address

Cane Corso

Breed of dog

15 months

Age

M

Male or Female

License No.

Was owner notified to confine dog until released by Department of Neighborhood Services? YES ☒ NO ☐

Remarks: The victim, James, was attacked by a dog he resides with at  
listed location. James suffered several bite puncture wounds  
that will require stitches. MPD Case # C2503060103

**Witnesses:**

Name

Address

Angela Griffin3750 W Roberts St.P.O. N. ORNELAS

Police Officer

**Distribution:**

Fax To - DNS: 286-5165

Original - DNS Lake Tower

Copy - Central Records Division

Supervisor

Date:

PV-1 Rev. 03/04

# MILWAUKEE POLICE DEPARTMENT

## VICIOUS ANIMAL REPORT

District 3Date March 6<sup>th</sup> 20 25Name of person injured Kimora L CaglePhone 262-6930778D.O.B. 9/10/10Sex FAddress 1957 N 36<sup>th</sup> St Milwaukee, Wisconsin 53208Place of occurrence 1957 N 36<sup>th</sup> StDate 3-6-25Time 16:10Extent of injuries minor bite puncture woundName of owner of dog Robert CaglePhone 414-544-0120D.O.B. 10-12-81Address 1957 N 36<sup>th</sup> StBreed of dog Cane CorsoAge 15 monthsMale or Female M

License No.

Was owner notified to confine dog until released by Department of Neighborhood Services? YES ☒ NO ☐

Remarks: Kimora, the victim, suffered minor bite puncture wound to her hand /  
no stitches required. Kimora was bit by her dog that she resides with  
at listed location. MPD case # C2503066103

## Witnesses:

Name

Address

Angela Griffin3750 W Roberts StP.O. N. ORNELAS

Police Officer

Supervisor

Date

## Distribution:

Fax To - DNS: 286-5165

Original - DNS Lake Tower

Conv - Central Records Division

PV-1 Rev. 03/04

**MILWAUKEE POLICE DEPARTMENT  
VICIOUS ANIMAL REPORT**District 3Date March 6<sup>th</sup> 20 25Name of person injured Shaliah CaglePhone 414-406-1105D.O.B. 4-25-09Sex FAddress 1957 N 36<sup>th</sup> St Milwaukee, Wisconsin, 53208Place of occurrence 1957 N 36<sup>th</sup> StDate 3-6-25Time 6:10Extent of injuries minor bite puncture wounds / no stitches requiredName of owner of dog Robert L CaglePhone 414-544-0120D.O.B. 10-12-81Address 1957 N 36<sup>th</sup> StBreed of dog Cane CorsoAge 15 monthsMale or Female M

License No.

Was owner notified to confine dog until released by Department of Neighborhood Services? YES ☒ NO ☐

Remarks: Shaliah, the victim, suffered minor bite puncture wound / no stitches required  
Shaliah was hit by her dog that she resides with at listed location.  
MPD case # C2503060103.

**Witnesses:**

Name

Address

Angela Griffin3750 W Roberts St.P.O. N. ORNELAS

Police Officer

**Distribution:**

Fax To - DNS; 286-5165  
Original - DNS Lake Tower  
Copy - Central Records Division

Supervisor

Date

ADDENDUM TO BITE REPORT

Complaint No. \_\_\_\_\_  
ENF - AC - 25 - 00296

Animal Owner's Name Robert Cagle

Address of Animal 1957 N. 36th St.

Date and Time of Day of Bite 3-6-25 approx 4:00 pm

Where Bite Occurred (address, yard, sidewalk, street, etc.) Front yard, East of house.

Type of Injury (puncture, scratches, laceration, abrasion) Bites to legs and feet,  
stitches

Circumstances of Bite

Animal Owner's Statement Owner not present at bite event.

He stated his daughters, Kimora and Shaliah  
came home from school with their cousin,  
Taijuan. Kimora opened the front door  
to let out the dog, unprovoked the dog  
attacked Taijuan who was in the front yard.

Person Bitten's Statement The girls, Kimora and Shaliah  
state that when the dog attacked Taijuan  
the both tried to stop the dog. Both suffered  
bites to their hands and wrists. A passer-by  
came to their aid and called the police.

Witnesses (name, address, phone number) \_\_\_\_\_

## ENF\_AC\_25-00296

Menu Reports Help

File Date: [03/07/2025](#)Application Status: [Open](#)Description of Work: [Dog Bite](#)Case Type: [Animal Nuisance Case](#)Address: [1957 - 1957 N 36TH ST. MILWAUKEE, WI 532081928](#)Owner Name: [ROBERT L CAGLE JR](#)Parcel No: [3480332100](#)

Application Name:

Contact Info:	Name	Organization Name	Contact Type	Relationship	Address	Contact Primary
	<a href="#">TANJUAN JAMES</a>		Person Bitten	Person Bitten	1957 N 36th St,...	

Custom Fields: GENERAL

Request ID	MPROP Land Use	Req
Priority	<a href="#">8820</a>	Sou
Case Type	Priority Type	Leg
Confidential Status	Complaint Information	Eme
Fire District	<a href="#">Dog Bite</a>	No
Image	Aldermanic District	Insp
Other City Department	<a href="#">15</a>	117
CDBG	Police District	Sou
	<a href="#">3</a>	DNS
	Side	DNS
	ASR Number	DNS
	CDBG Insp Date	Com

ANIMAL BITE

Date of Bite	Victim Notified to Contact Physician	Is an
<a href="#">3/6/2025</a>		
If yes where is it quarantined	Is there a hold on animal	Type
		dog
How did bite occur	Wound location	Nam
	<a href="#">several bite puncture wounds</a>	
License Number	Dog breed	Dog
	<a href="#">cane corso</a>	Age
Cat breed	Cat color	Age
Animal Sex	Animal PTS	Heat
<a href="#">Male</a>		
MD Treatment letter	Rabies vaccination status	Rabl
Vaccination Date	Expiration Date	Repr
		<a href="#">pollo</a>
Where Occurred		
<a href="#">In City</a>		

NON-HUMAN EXPOSURE

Aggressor Animal Name	Owner of Injured Animal	Is vli
Expiration Date	Rabies Tag Number	Anin
Animal declared prohibitively dangerous	Roit/Plit Order Issued	Date
Rabies test results		

ASSESS SCRIPT

Apply void	Void fee item

CASE HISTORY

Change By	Change Date	Changed Comment	Changed Complaint	Changed Response	District	DSS	Status	Complaint Status	Create date	Create time	E

Workflow Status:	Task	Assigned To	Status	Status Date	Action By
	<a href="#">Investigation</a>	Matthew Rzepkowski			

Condition Status:	Name	Short Comments	Status	Apply Date	Severity	Action By

Case Comments:	View ID	Comment	Date
	CJROSAR	<a href="#">Received Police Report via fax this morning, Pl...</a>	03/07/2025

Total Fine Assessed: [\\$0.00](#)



Total Fine Invoiced: [\\$0.00](#)

Balance: [\\$0.00](#)

Scheduled/Pending Inspections:	Inspection Type	Scheduled Date	Inspector	Status	Comments
	<a href="#">Initial Investigation</a>	03/07/2025	Matthew Rzepkowski	Scheduled	

Resulted Inspections:	Inspection Type	Inspection Date	Inspector	Status	Comments
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Violation:	Violation Text
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Initiated by Product: AV360

4/14/25

To whom it may concern:

REC'D 4/15/25

My name is Robert Cagle and I received a Prohibited Dangerous Animal notice for my dog Ghost. I would like to appeal this notice thank you

Robert cagle

1957 n 36<sup>th</sup> street

414-544-0120

## CHRONOLOGICAL RECORD OF ENFORCEMENT

ADDRESS: 1957 N 36TH ST MILWAUKEE WI

Original Inspection Date: 03/07/2025

ORDER #

ENF AC 25-00296

<u>DATE</u>	<u>COMMENT</u>	<u>Comment By</u>
03/07/2025	Received Police Report via fax this morning. Please have Inspector return paperwork back within 2 weeks of this report.	CJROSAR
03/07/2025	assigned to Dutmer	MRZEPK
03/07/2025	Also Robert Cagle called this morning to report the Bites, I informed Mr. Cagle I have gotten the Police Report and that an Inspector will reach out to him, he also said the kids jumped thru the window to get in which provoked the dog to attack.	CJROSAR
03/11/2025	(03/07/2025) Quarantine order issued to dog owner	ADUTMER
03/12/2025	(03/11/2025) Interview with bite victims at property	ADUTMER
03/12/2025	(03/11/2025) Spoke with daughters of dog owner who were present at the attack. They stated that on 3/6/2025 approx 4:00pm they got home from school, Shalia, Kimora and their young cousin, Taijuan. Not having a key, Kimora crawled in through a window that was not secured and went to let the dog, Ghost, out into the front yard where Shalia and Taijuan were waiting. They said that Ghost sniffed around for a bit and then moved to attack Taijuan unprovoked. They said they were trying to get Ghost to release Taijuan's legs and both of the girls suffered bites or abrasions to their hands and wrists in the scrum. They said that a passerby pulled their car over and came to their aid. The passerby called the police. The bites broke the skin on all three involved and Taijuan suffered multiple bites to the legs and had to receive stitches.	ADUTMER
03/12/2025	Email sent to Mr Cagle (cagle81@gmail.com) requesting photos of the wounds to Tiajuan.	ADUTMER
03/21/2025	(03/20/2025) Animal observed - Quarantine Released	ADUTMER

## CHRONOLOGICAL RECORD OF ENFORCEMENT

**ADDRESS:** 1957 N 36TH ST MILWAUKEE WI

**ORDER #**

**Original Inspection Date:** 03/07/2025

ORD-25-03587

<u>DATE</u>	<u>COMMENT</u>	<u>Comment By</u>
03/21/2025	supervisor reviewed and approved for mailing	HWEEED
03/21/2025	Orders and CLP insert information mailed 1st class	BHULL
04/09/2025	Spoke with dog owner, Robert Cagle (414-544-0120) he stated that he never received the order and was waiting for the inspector to call him with information regarding the appeal. I confirmed the mailing address. He said he would look around in case his kids put the envelope somewhere. He said he plans to appeal the order. Order emailed to cagle81@gmail.com, we agreed to touch base the following day.	ADUTMER
05/14/2025	Order extended, appeal hearing scheduled	ADUTMER
05/21/2025	Dangerous Animal Appeal Hearing Notice Mailed Certified.	JRANTA
06/09/2025	Inspector stated that the owner did not show on the appeal date-he will try to make contact on site and talk to neighbors to see if the dog/owner are still living at the address.	JKLOUD
06/12/2025	Appeal Decision Letter Mailed Certified.	JRANTA
06/17/2025	Spoke to Robert @ 414-544-0120 called wanting to leave note that they recieved the letter late and still wanted to appeal. Informed them that the person whom they would need to speak to is out of office and will return tomorrow 6/18/25. Robert states they will call back tomorrow at 8 am.	BHULL
06/26/2025	Re-inspected on (06/26/2025). No Compliance; Dog present at property.	ADUTMER
06/26/2025	Citation to be issued for noncompliance to order	ADUTMER
07/15/2025	See CIT-25-00166	ADUTMER