



BARKING DOG COMPLAINT FORM

COMPLAINANT INFORMATION					
COMPLAINANT'S LAST NAME		FIRST NAME	MIC	MIDDLE NAME	
PHYSICAL ADDRESS	CITY		STATE	ZIP CODE	
MAILING ADDRESS IF DIFFERENT FROM ABOVE			STATE	ZIP CODE	
	ABOVE CITY		01112		
TELEPHONE NUMBERS					
HOME:		OTHER:			
BARKING DOG INFORMATION					
OWNER'S LAST NAME		FIRST NAME	MIC	DLE NAME	
ADDRESS OF BARKING DOG(S) CIT	Y	STATE	ZIP	CODE	
TELEPHONE NUMBERS					
		OTHER:			
	DADIU				
DATE OF VIOLATION: (MM/DD/YY)		IG DURATION		CHECK ONE:	
	FROM:	TO:	INCE	SSANT INTERMITTENT	
DATE OF VIOLATION: (MM/DD/YY)	BARKI	IG DURATION		CHECK ONE:	
	FROM:	TO:	INCE	SSANT INTERMITTENT	
DESCRIPTION OF BARKING DOG(S) (IF KNOWN)	(001.05)	(0.75)			
(BREED)	(COLOR)	(SIZE)		(GENDER) M / F	
(BREED)	(COLOR)	(SIZE)		(GENDER) M \Box / F \Box	
OTHER RESPONSIBLE PARTY'S NAME(S)					
RESPONSIBLE PARTY'S RELATIONSHIP T	O OWNER				
Have you attempted to contact the dog(s) owner or any other Responsible Party? YES NO					
If yes, name of party contacted a	and date:	· · ·	·		
In a brief description, please tell	us what happened	ł?			

I DECLARE UNDER PENALTY OF PERJURY AND PURSUANT TO THE LAWS OF THE STATE OF CALIFORNIA THAT FOREGOING IS TRUE AND CORRECT. I UNDERSTAND THAT PER CALIFORNIA PENAL CODE SECTION 148.5, PROVIDING FALSE INFORMATION IS A MISDEMEANOR AND COULD SUBJECT ME TO CRIMINAL PROSECUTION AND THAT THE MAXIMUM PUNISHMENT FOR EACH VIOLATION IS SIX (6) MONTHS OF JAIL AND/OR A \$1000 FINE.

DATE	SIGNATURE