



## BARKING DOG COMPLAINT FORM

### COMPLAINANT INFORMATION

COMPLAINANT'S LAST NAME FIRST NAME MIDDLE NAME

PHYSICAL ADDRESS CITY STATE ZIP CODE

MAILING ADDRESS IF DIFFERENT FROM ABOVE

TELEPHONE NUMBERS

HOME OTHER

### BARKING DOG INFORMATION

OWNER'S LAST NAME FIRST NAME MIDDLE NAME

PHYSICAL ADDRESS CITY STATE ZIP CODE

MAILING ADDRESS IF DIFFERENT FROM ABOVE

TELEPHONE NUMBERS

HOME OTHER

DATE OF VIOLATION BARKING DURATION CHECK ONE:

(MM/DD/YY) From: (A.M./P.M.) To: (A.M./P.M.) INCESSANT ( ) INTERMITTENT ( )

DESCRIPTION OF BARKING DOG CIRCLE ONE:

BREED: COLOR: SIZE: SMALL/MEDIUM/LARGE GENDER: M/F

OTHER RESPONSIBLE PARTY'S NAME(S)

RESPONSIBLE PARTY'S RELATIONSHIP TO OWNER:

Have you attempted to contact the dog(s) owner or any other Responsible Party?  Yes  No

If yes, name of party contacted and date: \_\_\_\_\_

What happened? \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_