



# Barking Dog Complaint Form

Name of Complainant: \_\_\_\_\_

Address of Complainant: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Name of Dog Owner: \_\_\_\_\_ Address of Dog Owner: \_\_\_\_\_

Name of Dog(s): \_\_\_\_\_ Description of Dog(s): \_\_\_\_\_

## ***I Agree:***

1. To give full information to the Community Peace Officer / Municipal Enforcement Officer as to this matter, and
2. To appear in Court if required and give evidence as a witness to the truth of this complaint.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### **Directions for completing the attached Barking Complaint Record Forms**

**Note: forms must be completed for a period of 7 consecutive days**

Step 1 Enter the date when barking occurred (Column A)

Step 2 Enter the time when barking commenced (Column B)

Step 3 Enter the time that barking ceased (Column C)

Step 4 Enter **type** of bark (Column D):

1. Howl
2. Whine/cry
3. Bark - intermittent (4-5 x 1 minute)
4. Barking - repetitive (more than 10 x 1 minute)

Step 5 Forms **must** be completed for a period of **7 consecutive days**

Step 6 Please sign the form **before** returning it to CPO/MEO

#### OFFICE USE ONLY

Reference Number \_\_\_\_\_ Previous Warning \_\_\_\_\_

Disposition \_\_\_\_\_ Tag Number \_\_\_\_\_



