

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 Agre	a <i>-</i>		
matter, and	•	·/ Municipal Enforcement Officer as to this vitness to the truth of this complaint.		
Signed:		_ Date:		
	the attached Barking Comp pleted for a period of 7 cons			
	, nen barking occurred (Colu	•		
Step 1 Enter the date wi	•	ımn A)		
Step 1 Enter the date wi	nen barking occurred (Colu	ımn A) Column B)		
Step 1 Enter the date will Step 2 Enter the time will Step 3 Enter the time the	nen barking occurred (Columen barking commenced (Columrate barking ceased (Columrate)	ımn A) Column B)		
Step 1 Enter the date when the step 2 Enter the time when the step 3 Enter the time the step 4 Enter <i>type</i> of bark 1. Howl	nen barking occurred (Columen barking commenced (Column to Column D): 3. Bark - intermittent	imn A) Column B) n C)		
Step 1 Enter the date will Step 2 Enter the time will Step 3 Enter the time the Step 4 Enter <i>type</i> of bark 1. Howl 2. Whine/cry	nen barking occurred (Columen barking commenced (Column to Column D): 3. Bark - intermittent	imn A) Column B) (4-5 x 1 minute) (more than 10 x 1 minute) consecutive days		
Step 1 Enter the date will Step 2 Enter the time will Step 3 Enter the time the Step 4 Enter <i>type</i> of bark 1. Howl 2. Whine/cry	nen barking occurred (Columen barking commenced (Column Column D): 3. Bark - intermittent 4. Barking - repetitive	imn A) Column B) (4-5 x 1 minute) (more than 10 x 1 minute) consecutive days PO/MEO		
Step 1 Enter the date will Step 2 Enter the time will Step 3 Enter the time the Step 4 Enter <i>type</i> of bark 1. Howl 2. Whine/cry	nen barking occurred (Columnen barking commenced (Column B): 3. Bark - intermittent 4. Barking - repetitive orm before returning it to Content of Total Column D):	imn A) Column B) (4-5 x 1 minute) (more than 10 x 1 minute) consecutive days PO/MEO		

Please complete along with Barking Record Form and return

1. Have you approached the dog owner to discuss the problem? Yes No					
If yes what action did they take?					
2. Barking occurs: Once	twice	several times per day			
3. Dog barks regularly during the:	Day: morning	noon	dusk		
	Night: early evening _		late evening		
4. Barking may last for:	minute's	hours			
5. Barking increases when: Owners	leave property	Owners are home			
Other:					
6. Dog is barking at: People passing	property	Nothing	_		
Animals passing	g property	other			
7. Dog is barking from: Inside the House Outside of the House					
Other					
8. If more than one dog involved: Does	s one dog bark more tha	an the other?	Yes No		
9. Other relevant information:					

Record of Noise Nuisance

Forms must be completed for a period of 7 consecutive Days

A: Date	B: Time Commenced	C: Time Ceased	D: Type of Noise			
	•					
Name: Signature:						
Date:						