

Pasco County Nuisance Animal Affidavit

This document is to be completed by the complainant

NAME: _____
ADDRESS: _____
PHONE NUMBER: _____
EMAIL: _____
DATE OF INCIDENT: _____

He/she is personally known to me or has produced _____ as identification and executed the following affidavit and who sayeth:
That (description of the animal(s))

Being owned, harbored or kept at (address where animal(s) kept)

By (owner or harborer of animal(s))

Who live at (address if different then above)

Did create a nuisance by (check one per affidavit):

- Frequent barking, howling or making of noise between the hours of 11:00PM and 6:00AM
- Frequent or continuous barking, howling or making noise for periods of ten (10) minutes or more at a time
- Digging into, breaking or otherwise injuring or damaging shrubbery, trees, lawns, garbage, stored materials, public or private property
- Frequent or habitual depositing of excreta on property not belonging to the owner of the animal without the property owner's consent
- The running at large of a dog upon public or private property

On the dates, time(s) and at the location(s) listed below and including the length of time for barking violations.

| Date | Time | Location of Violation | Length of Time (hours and minutes) |
|------|------|-----------------------|------------------------------------|
|------|------|-----------------------|------------------------------------|

By my signature below, I hereby swear or affirm that to the best of my knowledge, all the information contained in this document is true. I also swear or affirm that the animal's/animals' behavior described above caused unreasonable annoyance/discomfort to myself and/or my family to such an extent as to deny me the ability to enjoy my own property and/or my right to peace and quiet.

Signature of complainant/affiant

For Official Use Only

Sworn or affirmed before me by means of (how the individual appeared, check one) _____ physical presence
online notarization

(Signature) Notary Public, Commission No. _____
My commission expires: _____

Investigating Officer:
Case No: