

COASTAL ANIMAL SERVICES AUTHORITY

SAN CLEMENTE - DANA POINT ANIMAL SHELTER

Kimberly Cholodenko
ANIMAL SERVICES
PROGRAM MANAGER

MAILING ADDRESS: 221 AVENIDA FABRICANTE SAN CLEMENTE, CA 92672

TELEPHONE: (949) 492-1617 FAX: (949) 366-4765

WEBSITE: http://san-clemente.org

BARKING DOG COMPLAINT FORM

COMPLAINANT INFORMATION							
COMPLAINANT'S LAST NAME			FIRST NAME			MIDDLE NAME	
MAILING ADDRES	SS			CITY	STATE	ZIP CODE	
					5111111	ZII CODE	
TELEPHONE NUM	BERS						
Home ()		Other ()				
BARKING DOG INFORMATION							
OWNER'S LAST N	AME		FIRST NAME		MIDDI	E NAME	
ADDRESS OF BAR	KING DOG(S)			CITY	STATE	ZIP CODE	
THE PROPERTY OF THE PROPERTY O	The same of the sa						
TELEPHONE NUM	BERS	Other: (`				
Home ()	DIDI	Other (TION/TIME: (A.M./	<i>)</i>	CHECK ON	TE.		
I" DATE:	DURAI	ION/TIME: (A.M.)	P.M.)	CHECK ON INCESSANT			
2 ND DATE:	DURAT	TION/TIME: (A.M.	/P.M.)	CHECK ON			
2 Bille.	INCESSA						
DESCRIPTION OF	BARKING DOG(S)						
OTHER RESPONSIBLE PARTY'S NAME(S)							
DECDONICIDI E DAI	DTV'C DEL ATIONCHID TO	OWNED.					
RESPONSIBLE PARTY'S RELATIONSHIP TO OWNER							
Have you attempted to contact the $dog(s)$ owner or any other Responsible Party? \square Yes \square No							
·	•			•			
If yes, name of	party contacted and	date:					
-							
What happened	?:						
DATE	SIGNATURE						
	X						

Print and mail this form to:

Coastal Animal Services Authority c/o Barking Dog Desk 221 Avenida Fabricante San Clemente, CA 92672