## DALLAS ANIMAL SERVICES DANGEROUS DOG AFFIDAVIT

## I. Complainant/Victim Information

Name:			Sex: □ Male □ Female		
Address(Street)	(City)	(State)	(7in)		
Phone Number: (W)		(H)		(C	)
Email Address:	Parer	nt/Guardian Name (If	Victim under 18):		
Accused Dog's Description Species:	Breed:			Age:	Sex: □ Male □ Female
Spayed or Neutered: ☐ Yes ☐ N	o Size of Animal	I: □ Small □ Medium	ı □ Large Col	or and Markings: _	
Name (If known):		(Note	e: If more than o	ne dog involved	in the incident, use multiple forms
Incident Location					
Date of Incident:		Time of Incide	nt:		
Address:	(Street)	(City)		(State)	(Zip)
. Incident Details Physical location where incident of	. ,	, ,,			
If the <b>accused dog</b> made physica	al contact with <b>you</b> , de	escribe how the contac	ct ended:		
Did <b>you</b> receive any injuries? □Y	es □No If yes, please	e describe in detail an	y injuries you rec	eived:	
In addition, please attach pictur	es and anv medical	records which mav b	ne utilized to as:	sist in the investi	igation of this incident.
If you did not receive any injuries, and cause bodily injury? □Yes □	did the <b>accused dog</b> INo If yes, please exp	g act in such a mannel	r that you reason detail:	ably believed that	the dog was going to attack you
Was the incident with the accuse	d dog unprovoked? [	□Yes □No Pleaseex	plain:		
How did the incident end between	you and the accuse				
Did <b>your animal</b> provoke the <b>acc</b>	used dog in any way				
Was your animal confined or res	trained at the time of t	the incident? □Yes □	INo Please expla	ain:	

DAS-FRM-209.SAF.1 Effective Date: 3/9/22 Rev.5

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If the accused dea made con	toot with your animal o	losoribo how the cont	astandad:		
in the <b>accused dog</b> made con	tact with <b>your animal,</b> c	lescribe now the cont	actended		
Did <b>your animal</b> receive any i	njuries? □Yes □No If y	res, please describe i	n detail any injurie	s <b>your animal</b> re	ceived:
In addition. please attach pi	ctures and any veterin	arian records which	may be utilized t	to assist in the i	nvestigation of this incident.
Vitness(es) Information rovide the following information	n for any witnesses who	may have first-hand	knowledge about	this incident:	
ame:		Age:			Sex: □ Male □ Female
ddress(Street)	(City)	(State)	(Zip)		
hone Number: (W)		(H)		(C)	
ame:		Age:			Sex: □ Male □ Female
ddress(Street)	(City)	(State)	(7in)		
				(C)	
Owner/ Possible Owner of A Name:	ccused Dog				
Address:(Street) (0	City)	(Sta	ate)		(Zip)
		Phone: (C)			
How did you identify the owne	r/ possible owner?				
Signature I swear that the above inform	nation is true and correct	to the best of my kno	owledge.		
(Complainant/Vi	ctim)		(Date)		
(Parent or Guardian, if vic	tim under 18)				(Date)
SUBSCRIBED AND SWORM	TO BEFORE ME by th	e said			
on thisday of			, 20		
My Commission Expires:					
PLEASE RETURN TO:	Done	gerous Dog Superv	icor	Notary F	Public in and for the State of Tex

Dangerous Dog Supervisor 1818 N. Westmoreland Rd. Dallas, TX 75212 PH#: 214-670-8380 DASDangerousdog@dallascityhall.com

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