Town of Davidson

EXCESSIVE BARKING LOG SHEET

Civic Address/Location of Barking Dog(s): _____

Description of Dog(s): _____

Date	Time Barking Started	Time Barking Ceased	Reason for Barking	Dog Owner Contacted	General Comments
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	
				Yes No	

I, _____ of civic address _____ hereby certify that the information recorded in this log is true and accurate and would testify to its accuracy in a Court of Law, if required to do so.

_____ _____

Printed name of Recorder/ Complainant **Date**

_____

Signature of Recorder/Complainant