## SCHEDULE "A" TOWN OF COALHURST BYLAW NO. 379-15

## QUESTIONS TO BE ASKED RELATIVE TO BARKING DOG COMPLAINTS

Date:		_		
Type of residence (	(Circle One):			
Single dwelling	Duplex	Condominium	Apartment	Basement Suite
Address or Loc	cation of barkin	ng dog(s)		
2. Number of dog	gs being compl	ained about?		
3. What breed or	approximate b	reed is/are the dog(s)?		
a)		b)		
c)		d)		
4. What color is/a	are the dog(s)?			
a)		b)		
c)		d)		
5. When does the b bark all day and nig	=	e normally occur? (Be	e specific - Dogs D	OO NOT NORMALLY
Time(s) of day				
Day(s) of Week				
6. Where on the p	property is/are	the dog(s) located or k	cept?	
7. Can you observ	ve the dog(s) b	arking?YesN	o	
8. Can vou identi	fy the offendin	g dog(s)? Yes	No	

9.	Can you identify when the owner is home?YesNo
10.	Does the dog(s) bark when the owner is home?YesNo
11.	Does the dog(s) bark when the owner is away?YesNo
12.	Is the dog(s) outside when the owner is away?YesNo
13.	When is the dog owner usually home?
14.	Have you discussed this with the dog owner?YesNo
Res	sult of discussion (if any)
If n	ot, why not?
15.	Are you prepared to testify in Court?YesNo
	How long has the dog resided at the address? Month's Years
<u>co</u>	MPLAINANT INFORMATION
Nar	me:
Ado	dress:
Pho	one:
Sig	nature:
DA	TE: