

CITRUS COUNTY ANIMAL SERVICES
4030 S. AIRPORT RD.
INVERNESS, FLA. 34450
(352) 726-7660

ANIMAL NUISANCE AFFIDAVIT
(Instructions)

1. In accordance with Citrus County Ordinance 83-07 an "Affidavit of complaint" regarding an animal nuisance must be signed by (1) or more residents of Citrus County. Each complainant must reside in a separate dwelling in the vicinity in which the violation and issue occurred. Only complaints which meet this requirement can be investigated.
2. Affidavit forms must be filled out completely before any action may be taken.
3. The affidavit form must be notarized.
4. All incidents of nuisance barking by the offending dog must be documented. Include the date, times of day the barking started and stopped and a brief description of the type of disturbance.
5. The documentation completed by yourself must be from personal observation of the barking dog.
6. Documentation should be for a period of at least five (5) days.
7. If we prosecute the owner of the offending dog on your behalf and a plea of "Not Guilty" is entered, it will be necessary for you and any other witness to testify "under oath". You must be able to state that you "personally observed" the dog barking and be prepared to describe the dog and a brief description of what took place. It is not sufficient for a witness to say they only heard a dog bark.
8. Upon receipt of a completed nuisance affidavit, an Animal Control Officer will investigate the complaint and interview all complainants and witnesses.
9. The owner of the animal causing the alleged nuisance will be notified of the complaint against them, and will be requested to correct the nuisance situation within 72 hours (warning citation). Upon request, the animal owner has the right to know who has complained about their animal(s).
10. After 72 hours, if Animal Control receives another complaint, a uniform citation will be issued.

**CITRUS COUNTY ANIMAL CONTROL
4030 S. AIRPORT RD.
INVERNESS, FLA. 34450
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ANIMAL NUISANCE AFFIDAVIT

COMPLAINANT (1)

NAME _____

ADDRESS _____

CITY, ZIP _____

PHONE _____

COMPLAINANT (2)

NAME _____

ADDRESS _____

CITY, ZIP _____

PHONE _____

1. THAT (DESCRIPTION OF ANIMAL) _____

2. OWNED, KEPT, OR KENNELED AT (ADDRESS) _____

3. DID CREATE A NUISANCE BY _____

4. ON (DATES) _____

5. AND THAT SAID OWNER OR CUSTODIAN HAS BEEN CONTACTED BY _____

ON SEVERAL OCCASIONS.

6. AND THAT SAID OWNER OR CUSTODIAN OF ANIMAL HAS FAILED TO CORRECT THE ABOVE NUISANCE.

SIGNATURE, COMPLAINANT #1

SIGNATURE, COMPLAINANT #2

NOTARY PUBLIC _____

MY COMMISSION EXPIRES _____

STATE OF FLORIDA

CITRUS COUNTY

Subscribed and sworn before

me, on this _____ day of _____

, 200__, by _____

who produced _____
as identification.

CITRUS COUNTY ANIMAL CONTROL
 4030 S. AIRPORT ROAD
 INVERNESS, FLA. 34450
 (352) 726-7660

RECORD OF NUISANCE ANIMAL DISTURBANCE

COMPLAINANT

NAME:	ADDRESS:	
CITY:	ZIP:	PHONE:

SOURCE OF DISTURBANCE

NAME:	ADDRESS:	
CITY:	ZIP:	PHONE:
DESCRIPTION OF ANIMAL(S)		

DATE EXAMPLE JANUARY 1, 1996	TIME SPECIFY AM OR PM START - STOP 6:00 AM - 6:15 AM	COMMENTS EXAMPLE: BLACK LAB CHAINED TO TREE, BARKING AND HOWLING.
SIGNED:		PAGE NO. OF
DATE SIGNED:		