

# City of Temple Dangerous Dog Affidavit

## I. Complainant/Victim Information

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Sex:  Male  Female

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone Number: (W) ( ) \_\_\_\_\_ (H) ( ) \_\_\_\_\_ (C) \_\_\_\_\_

Parent/Guardian Name (If Victim under 18): \_\_\_\_\_

## II. Description of Attacking Animal

Name, if known: \_\_\_\_\_ Species: \_\_\_\_\_ Breed: \_\_\_\_\_

## III. Incident Information

Date(s) of Incident: \_\_\_\_\_ Time(s) of Incident: \_\_\_\_\_

Physical location where incident occurred (Be specific: i.e. address and where on premises) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Was the animal confined or restrained at the time of the incident?  Yes  No

## IV. Animal versus Human

Did the animal make physical contact with you?  Yes  No If yes, please describe contact

\_\_\_\_\_

\_\_\_\_\_

Please describe in detail any injuries received. In addition, please attach pictures and any supporting medical documentation which may be utilized to assist in the investigation of this incident \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If there was no contact between the animal and you, did the animal act in such a manner that you reasonably believed that the animal was going to attack you and cause bodily injury?  Yes  No

If yes, please describe the incident in full detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did you provoke the animal by teasing, tormenting, abusing or assaulting the animal?  Yes  No

How did the incident end? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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