

STATE OF TEXAS COUNTY OF SWISHER

CITY OF KRESS DANGEROUS ANIMAL CITIZEN COMPLAINT AFFIDAVIT

I. Instructions

1. Please answer all questions as specifically as possible.
2. This is your affidavit, and the answers are considered sworn statements.
3. Incomplete complaints will not be considered.
4. If a question doesn't apply, write "N/A".
5. If you do not know the answer to a question, you can state, "I don't know."
6. You can use extra sheets if necessary. (Please attach them to this form)
7. If there is any video, audio, photographic, or other documentary evidence, it must be submitted to Animal Services on a DVD or USB flash drive and capable of playing on Windows Media Player. This complaint cannot be evaluated until any documentary evidence available is provided to Animal Services.
8. Form MUST be notarized before submitting by a Notary Public of the State of Texas.

II. Complainant/Victim Information

Name: _____ Age: _____ Gender: Male Female Address: _____

_____ (Street)

(City) (State) (Zip) Phone Number: (W) _____ (H) _____

(C) _____ Email _____ Parent/Guardian Name (If victim under 18): _____

III. Description of Attacking Animal

Description of Dog(s) _____ Breed: _____ Name: _____

Description of Dog(s) _____ Breed: _____ Name: _____

Description of Dog(s) _____ Breed: _____ Name: _____

IV. Incident Information

1. Date(s) of Incident: _____ Time(s) of Incident: _____

2. Where were you when the attack happened (Be specific: i.e. address and where on premises— front

yard, back yard, street, sidewalk, curb, park, patio, etc.): _____

3. What were you doing before the attack happened? _____

4. When did you first see the animal(s) before the attack and what was it doing? _____

5. Was the animal(s) inside a house, fence, crate, or other enclosure? _____

6. Did you provoke the animal by teasing, tormenting, abusing or assaulting the animal? Were you talking to or doing anything to the animal? _____

7. Was the animal(s) on a leash, tethered, or restrained in any way by the owner? _____

8. Was the owner, or anybody else, present during the attack? If so, who? _____

9. Did you have any injuries? (If yes, please describe) _____

10. What caused the injury (bite, scratch, other, etc.)? _____

11. Did you seek medical care? Why or why not? What treatment was required? _____

12. Was an animal owned by you injured? If so, describe what happened: _____

13. If you were not injured, did you believe that the animal was going to attack you and cause you bodily injury? Why? _____

14. Is there any documentary evidence of what happened (e.g., video, pictures, text messages, emails, voice mail recordings, medical reports, etc.)? If so, please describe and provide a copy along with this report. Video, audio, and other electronic evidence must be submitted to Animal Services via a DVD or USB Flash Drive and must be accessible to Windows Media Player.

IV. Person/Persons In Control of Attacking Animal (Possible Owner)

Name: _____

Address: _____

(Street) (City) (State) (Zip) Phone: (W) _____ Phone: (H) _____

(C) _____ How did you identify the person/persons in control?:

Describe any conversation between you and the owner(s) or a family member, witness, friend, etc., of the owner(s) regarding this incident: _____

Have you and the owner(s) of the animal been involved in any other dispute or incidents? (Describe and include police report numbers if applicable): _____

V. Witness Information Provide the following information for any witnesses who may testify about this incident:

Name: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: (W) _____ Phone: (H) _____ (C) _____

How was this witness involved? _____

Name: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: (W) _____ Phone: (H) _____ (C) _____

How was this witness involved? _____

Name: _____

Address: _____
(Street) (City) (State) (Zip)

Phone: (W) _____ Phone: (H) _____ (C) _____

How was this witness involved? _____

VI. Describe any other information or details that may assist with the investigation or add any necessary information from one of the previous questions (indicate which question) (use additional pages if necessary):

VII. Signature

(2) YOUR SWORN STATEMENT CONSTITUTES A RETALIATION FOR REPORTS MADE AGAINST YOU; OR

(3) IF YOUR SWORN STATEMENT INCLUDES AN ADMISSION OF A CRIMINAL OFFENSE COMMITTED BY YOU.

I understand that my complaint will be evaluated and that a dangerous dog determination must be supported by sufficient evidence as required by law. If the matter is contested, the City, with your testimony, has the burden to prove that the dog is a dangerous dog with a preponderance of the evidence. If this burden cannot be met, the Court and/or Animal Services will not be able to determine that the dog is a dangerous dog.

City of Kress
308 Skipworth Ave Kress Texas 79052
806-994-5051
office@cityofkress.com



Also, I understand that if this complaint is accepted, the owner has a right to contest this matter and that I may be required to testify in a Municipal Court, Justice Court, or County Court hearing on short notice. Furthermore, I understand that there are multiple options for the Owner(s) to appeal a dangerous dog determination, and that I may be called to testify more than once. By signing below, I agree that I will be available to testify more than once if needed. I understand that if I do not respond to a request to appear in court or if I fail to appear, the case may not be able to proceed and a dismissal may be requested. I swear, under the penalty of perjury, that the above information is true and correct to the best of my belief and knowledge.

(Complainant / Victim) (Date)

(Parent or Guardian, if victim under 18) (Date)

SUBSCRIBED AND SWORN TO BEFORE ME by the said _____

On this the _____ day of _____, 20 _____

My Commission Expires: _____
Notary Public in and for the State of Texas.

**PLEASE RETURN TO: Kress Animal Control
Attn: Dangerous Dog Investigator
PO BOX 236 KRESS, TX 79052**