



**Sonoma County Animal Services
Sworn Statement/Affidavit**



Activity Number: _____

Date: _____

Victim Statement Witness Statement Animal Owner Statement

Name: _____

Address: _____

Home Telephone: _____ Telephone: _____

Date of Incident(s): _____

Location of Incident(s): _____

Narrative Directions

Please describe the incident(s) in legible handwriting (or prepare a printed statement), including details of the incidents(s), descriptions of any defensive action that was taken to prevent bodily injury, any attack(s) by the animal(s) including any animal bites against other people or domestic animals, and all other relevant information including any witness name and identification. If reporting an animal nuisance, including but not limited to, barking complaints, animal running at large, or attacks on livestock, describe the nuisance, including dates and times and locations when the nuisance occurs, as well as owner information.

If more than one page, check one of the following:

Narrative Continued on Back Narrative Contained on Attached Printout

I have been made aware of Sonoma County Animal Services procedures in regard to the incident(s) specified above. Under penalty of perjury, I declare that the above/attached narrative statement consisting of _____ page(s) is a truthful and accurate account of events. _____ (Initial)

Signature: _____

Parent/Guardian Signature (If Applicable): _____

Continued On Back

