

Address: #201 - 660 Primrose Street. PO BOX 130, Qualicum Beach, BC V9K 1S7

Phone: 250.752.6921

Email: gbtown@qualicumbeach.com

BARKING DOG COMPLAINT FORM

DATE SUBMITTED:

INSTRUCTIONS

To deal effectively with the barking dog complaints, the Town of Qualicum Beach asks that citizens assist by providing the information detailed below:

- 1. When this form and the attached daily record are completed, for consideration of enforcement purposes, please mail or return all forms to:
 - o **Email:** Complete the fillable PDF form and send it to qbtown@qualicumbeach.com
 - o In Person: Town of Qualicum Beach, #201-660 Primrose Street, Qualicum Beach, BC

Town Hall hours of operation are Monday to Friday from 9:00 am to 4:00 pm.

- 2. It is required to be submitted at the same time:
 - a. the completion of this form by a member of each household disturbed by the barking dog(s); and
 - b. a daily record (for seven consecutive days) of the times when the barking most disturbs the peace.
- 3. Each person who completes this form must:
 - a. print their name and sign;
 - b. be a resident of the neighbourhood;
 - c. be disturbed by the barking;
 - d. be over 16 years of age; and
 - e. be willing to testify in court as a witness

COMPLAINT FORM			
How long has the barking been a disturbance? (e.g. 1 month, 1 year, e	tc.)		
What prior steps/measures have you taken to correct the situa	tion?		
What is the frequency of the disturbance? (e.g. every day, every night,	nost days, most nights, etc.)		
What is the duration of the disturbance? (Number of hours each night, e	tc.)		
What effect does this disturbance have on you? (Disturbs your sleep,	etc.)		
Whom do you believe owns the dog(s) or controls the dog(s) (No	ame and address)		
Signature	Date		

Please sign above and attach a daily record, as per instruction 2(b).



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DAILY BARKING RECORD
Description of Dog(s)
Breed(s)
Colour(s)
Name(s)
Address of alleged barking dog(s)

	DAILY BARKING RECORD		
Date (Y/M/D)	Start Time (AM/PM)	Duration of barking (how long was it?) Continuous, sporadic over several hours, how it disturbed you on each occasion	Dog seen? (Y/N)

EVERY NOTATION MUST BE 100% FACTUAL AND 100% TRUTHFUL

Upon completion of this log (after 7 consecutive days), return this form to the Town of Qualicum Beach with the complaint form attached.

Complainants must be prepared to go to court & provide testimony if required.

Personal information on this form is collected under the guidelines of the Freedom of Information and Protection of Privacy Act ("FIPPA") and will only be used for the purpose of administering the Barking Dog Complaint Form. Questions about this collection can be directed to the Corporate Administrator, Box 130, Qualicum Beach, BC or at 250-752-6921.