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**BARKING DOG**

**COMPLAINTS FORM AND DIARY**

**ATTENTION: Animal Management Officer**

The barking of dogs is one of the most common complaints about dogs. Barking is a dog’s natural way of communicating and can be protection for the home owner. It is an offence when a dog creates a noise by barking (or anything else) which persistently occurs or continues to such a degree that it unreasonably interferes with the peace, comfort or convenience of a person.

Dog owners are responsible for making sure dog barking does not become a problem. Some people are very sensitive to noise. If a complaint is made, regardless of how trivial it may seem, it is a responsibility of the Animal Management Officer to act.

DECLARATION

|  |  |  |  |
| --- | --- | --- | --- |
| Nuisance Dog/s Details: |  | | |
| *Insert – breed of dog, gender and primary colour, distinguishing features* | | |
| The dog/s is believe to be belong to: |  | | |
| *Insert owner’s name, if known* | | |
| The dog/s is kept at: |  | | |
| *Insert address of where dog is kept* | | |
| Has created a nuisance by persistent barking or otherwise making a noise. |  | | |
| Name of Person Lodging Complaint |  | | |
| Address: |  | | |
| *Telephone (home)* |  | *Telephone (mobile)* |  |
| **Request that Council investigate the alleged nuisance and I undertake:** | | | |
| 1. **To give full information to the Council as to this matter; and** | | | |
| 1. **To appear in Court to give evidence as a witness.** | | | |
| Dated: the day of 20 . | | | |
| *Full name of Complainant:* |  | Signature of Complainant: |  |

DIARY OF DISTURBANCES CAUSED BY DOG NOISE

|  |  |
| --- | --- |
| **Person Completing the Diary** | |
| Full name: |  |
| Residential Address: |  |
| Postal Address: |  |
| Telephone Number (mobile): |  |
| **Breeds of Dogs** *if more than one dog is kept on the property, and if you can identify which dog is creating the noise, please specify the particular dog.* | |
| 1. | |
| 2. | |
| 3. | |
| **Address where the dog(s) is/are kept:** | |
| The diary may be commenced on any day but must continue for the following fourteen (14) consecutive days. If necessary, please use more diary sheets. | |
| The diary must be a true and accurate record of your observations. To record the dog as barking continuously refer to the below recording method:   * less than one minute, record it as -1; * more than a minute record it as 1+, * less than two minutes, record it as -2 etc. | |
| The description of behaviour column is where your observations are recorded eg dog howling, dog barking on and off every 5-10 minutes, dog didn’t stop barking, owners not at home etc. | |
| If at any time, you are absent from your home, please record it with an ‘X’ in each square so that an accurate record is kept of your observations. | |
| **Comments:** If there are other details you wish to bring to Council attention *(eg What is the dog/s doing to be a nuisance? How does it impact you?)* and the below space is insufficient, please attached additional pages. | |
|  | |
| When completed, please return this form to the Council office. | |

*For any queries regarding completing of this form and any nuisance dog related matter, please contact   
Council’s Animal Management Officer on (08) 8828 1200 (press 3).*

**DIARY (FOURTEEN DAY) – DOG BARKING / NUISANCE COMPLAINT**

**Dog and Cat Management Act – Section 51 Grounds for a Control (Barking Dog or Nuisance Dog) Order and Section 43 Penalties.**

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| WEEK 1 - Date | 1AM | 2AM | 3AM | 4AM | 5AM | 6AM | 7AM | 8AM | 9AM | 10AM | 11AM | NOON | 1PM | 2PM | 3PM | 4PM | 5PM | 6PM | 7PM | 8PM | 9PM | 10PM | 11PM | MIDNIGHT | Description of behaviour |
| Mon |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Tues |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Wed |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Thurs |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Fri |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sat |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Sun |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| WEEK 2 - Date | | 1AM | 2AM | | 3AM | 4AM | 5AM | 6AM | 7AM | 8AM | 9AM | 10AM | 11AM | NOON | 1PM | | 2PM | 3PM | 4PM | 5PM | 6PM | 7PM | 8PM | | 9PM | 10PM | 11PM | MIDNIGHT | Description of behaviour | | |
| Mon | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Tues | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Wed | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Thurs | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Fri | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Sat | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
| Sun | |  |  | |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  | |  |  |  |  |  | | |
|  | | |  | | | | | |  | | | | | |  | | | | | | | |  | | | | | |  |
| *Full name of Complainant:* | | |  | | | | | | Signature of Complainant: | | | | | |  | | | | | | | | Date: | | | | | |  |