

Hudson NH Police Department Barking & Animal Noise Affidavit

YOUR NAME: _____

YOUR ADDRESS: _____

YOUR PHONE NUMBER & EMAIL: _____

Incident information (Be specific with all details, dates and times; fill in all fields use N/A if do not know)
Incomplete affidavits will NOT be processed and you will not be notified that the case is closed.

DATE OF NOISE/BARKING: _____

Start Time (circle AM or PM): _____ AM/PM End Time: _____ AM/PM

Longest break in noise: _____ hours _____ minutes _____ seconds

Approximate number of interruptions or breaks during the listed time: _____

Do you have an audio or video recording of the incident? _____ YES _____ NO

Animal Description: _____

Address of Noise/Barking: _____

Approximate Distance from Noise to your Address: _____

Name of Owner/Keeper (if known): _____ ☐ Check if you spoke to them.

Do you know if the dog is tethered? _____ Yes _____ No

Is the dog/animal confined to a specific area _____ Yes _____ No

If "yes" – What area? _____

Does the dog/animal appear to be injured? _____ Yes _____ No

Other observations of dog/animal condition: _____

Detailed Description of the incident (please provide as much exact detail as possible, continue on page 2.

Page 2: Detailed Description of the Incident (continued from page 1)

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

Signature and Date

State of New Hampshire, County of Hillsborough

Sworn to (or affirmed) and subscribed before me this ____ day of ____, 20__,
by _____

Personally known ____ or Produced Identification ____

Type of Identification Produced:

Notary seal & signature