## 400-610 BARKING DOG REPORT

R O U T I N G	LAGUNA WOODS VILLAGE SECURITY DIVISION			CASE#	CASE#							PAGE 1 Of 1	
					INCIDENT REPORTED								
	BARKING DOG REPORT			DATE			DAY OF WEEK WED		sd	sdf		TIME AM PM	
	400-610 (	6.6005	6 6005 #										
	0 PHOTOS			S CODE	S CODE #  0920 - NOISY ANIMAL								
O C A T I	BLDG # - APT # STREET / INTERSECTING ST			STREET #	TREET #			PPHASE #			TTOWER(1/2/3)		
								DBLOCK #			C CARPORT		
	OTHER (CLUBH	RT, ETC)	, ETC)			☐ Choose an item.							
N													
S U B J E C T	LAST NAME		FIRST NAME		M.I.		D.O.B		SEX	SEX ID#		/ PASS#	
												T	
	ADDRESS / BLDG-APT # C			CITY	CITY			STATE		ZIP		PHONE #	
							a						
	INVOLVEMENT: Choose an item.			IDENTITY	IDENTITY			Choose an item.					
P A R T Y	LAST NAME FIRS		FIRST NAME	NAME			D.O.B		SEX	X ID# / PASS#		PCM W/C#	
	ADDRESS / BLDG-APT #			CITY				STATE		ZIP		PHONE #	
						a							
1	INVOLVEMENT:	IDENTITY	IDENTITY			Choose an item.							
ARRIV	AL TIME :			M PN	/I /	4RRI\	/AL T	IME :				AM PM	
WHILE ON SCENE :													
☐ THE DOG WAS BARKING ☐ I DID NOT HEAR THE DOG BARKING													
NUMBER OF DOG(S) SEEN/HEARD :													
□ NONE □ ONE □ TWO □ THREE OR MORE													
THE SUBJECT WAS INFORMED OF COMPLAINT BY: (CHECK ALL THAT APPLY)													
☐ IN PERSON ☐ PHONE ☐ DOOR HANGER ☐ DID NOT CONTACT (NO BARKING HEARD)											IG HEARD)		
PARTY2 CONTACTED:													
☐ IN PERSON ☐ PHONE ☐ DID NOT WANT CONTACT													

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ADDITIONAL INFORMATION:	