



# HEALTH & HUMAN SERVICES AGENCY PUBLIC HEALTH DIVISION-ANIMAL SERVICES

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SOUTH LAKE TAHOE, CA 96150  
(530) 573-7925

## POTENTIALLY DANGEROUS DOG QUESTIONNAIRE

NAME: \_\_\_\_\_ CASE # \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ AGE: \_\_\_\_\_

**Please complete all questions that apply and return to Animal Services within 3-5 business days.**

1. Date this incident occurred: \_\_\_\_\_ Time of incident: \_\_\_\_\_
2. Where does the dog live? \_\_\_\_\_
3. Animal owner's name: \_\_\_\_\_ Owner's phone number: \_\_\_\_\_
4. Is the problem with more than one dog at this address? **Y/N** Number of dogs involved \_\_\_\_\_
5. Is the problem with multiple dogs from different addresses? **Y/N**
6. If required could you identify the dogs from photos? **Y/N** In person? **Y/N**
7. Was the dog off its owner's property when the incident occurred? **Y/N** About how far? \_\_\_\_\_
8. Please describe the dog(s) to the best of your ability. **COLOR:** \_\_\_\_\_  
**SEX** (if known): \_\_\_\_\_ **NAME** (if known): \_\_\_\_\_  
**BREED** (if known): \_\_\_\_\_ **LONG HAIR?** **Y/N** **SHORT HAIR?** **Y/N**  
**OTHER IDENTIFIABLE CHARACTERISTICS:** \_\_\_\_\_
9. Where did this incident occur? (On your property? In the roadway? etc.) \_\_\_\_\_
10. Were there injuries? **Y/N** Who was injured? \_\_\_\_\_ What type of injury? \_\_\_\_\_
11. If injury was a bite or scratch by the dog was medical treatment given? **Y/N**
12. Was the bite reported to Animal Services? **Y/N**
13. Was one of your animals (dog, cat or livestock) injured or killed? **Y/N** *If yes please include a description of the injuries below. Attach a photocopy of any veterinary bills if available.*
14. Were there pictures taken of the bite or injuries to your animals? **Y/N**
15. Where was your animal? \_\_\_\_\_
16. If off your property was your animal on a lead or leash? **Y/N**
17. If legal proceedings should be required in the interest of public safety would you be willing to appear and offer testimony regarding this situation? **Y/N**
18. Please describe the incident in your own words. For your convenience a statement form is provided. You may attach a statement generated from your computer, typewriter if desired.

**Please include information regarding the animal's behavior and what if any action you had to take to feel safe.**

I certify under penalty of perjury that the information contained herein and in any attached documentation is true and correct to the best of my knowledge.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

