



North Dakota

## Instructions for Animal Nuisance Complaint Form

### Complainant(s):

Complainant(s) must fill out the form completely and then print out and sign the form. If there are additional complainants (optional), they may add their contact information also.

### Incident Date and Time:

List a specific date and time that the barking or nuisance occurred. The incident must meet the guidelines set forth in chapter 11 of the ordinance.

- If this form is signed by 1 person, it *MUST* be accompanied by audio, videotaped, or photographic evidence of the alleged violation.
- If this form is signed by persons from 3 separate households, audio or video evidence is *NOT* required. All 3 people must witness the nuisance incident described on the form.

### Owner of Animal

In order to process a complaint, we must have owner contact information for the animal(s).

### Description of Animal

Please be as complete as possible. Attach additional sheets if needed.

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### Notice to Complainant(s):

Complainant(s) listed on this form must be willing to appear at a council meeting/hearing or this incident could be dismissed.

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Mail the completed form:  
City of Gladstone  
PO Box 218  
Gladstone, ND 58630

Or

Email the completed form:  
auditor@gladstonend.org

\*Completed forms may also be  
dropped in the water box.

# ANIMAL NUISANCE COMPLAINT FORM

Check One:

Barking Dog Complaint     General Nuisance Complaint

## Complainant (REQUIRED):

Name	Date	Signature
Address	Zip	Phone
Email		

## Additional Complainant (Optional):

Name	Date	Signature
Address	Zip	Phone
Email		

## Additional Complainant (Optional):

Name	Date	Signature
Address	Zip	Phone
Email		

## Incident Date and Time (REQUIRED):

On \_\_\_\_\_ at \_\_\_\_\_ : \_\_\_\_\_ am /pm, the nuisance occurred at:  
(date) (time)

Other notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Owner of Animal(s) (REQUIRED):

Last Name	First Name	
Address	City	Zip

## Description of Animal(s):

Breed	Color	Sex	Name

## Office Use Only:

This petition is filed in reference to the following complaint.	Complaint #
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