

AFFIDAVIT FOR SUMMONS FOR DANGEROUS DOG OR VICIOUS DOG

Commonwealth of Virginia VA. CODE §§ 3.2-6540, 3.2-6540.1, 3.2-6542

..... General District Court

CITY OR COUNTY

I, the undersigned applicant, [] a law enforcement officer [] an animal control officer in the above-named city/county, state under oath that

1. I have reason to believe that the canine or crossbreed described below is a [] dangerous dog [] vicious dog based upon the following:

..... [] Continued on attached sheet.

2. The canine or crossbreed is described as follows:

3. The canine or crossbreed is at the following location:

4. To the best of my knowledge and belief, the person who is responsible for the canine or crossbreed is

[] the dog's owner, [] the dog's custodian,

[] a minor, whose custodial parent/legal guardian's name is

[]

5. [] I have personal knowledge of the facts set forth in this affidavit. [] I was advised of the facts set forth in this affidavit, in whole or in part, by another person whose credibility or the reliability of the information may be determined from the following facts:

I request the issuance of a SUMMONS – DANGEROUS DOG OR VICIOUS DOG to the person(s) identified above pursuant to

[] Virginia Code § 3.2-6540 [] Virginia Code § 3.2-6540.1 [] of
LOCAL ORDINANCE [] COUNTY [] CITY [] TOWN

DATE [] LAW ENFORCEMENT OFFICER [] ANIMAL CONTROL OFFICER

TELEPHONE NUMBER PRINT NAME AGENCY

State of [] City [] County of

Acknowledged, subscribed and sworn to before me this day of, 20

NOTARY REGISTRATION NUMBER [] MAGISTRATE [] NOTARY PUBLIC
(My commission expires:))

AFFIDAVIT FOR SUMMONS FOR DANGEROUS DOG OR VICIOUS DOG

OWNER OF DOG (LAST, FIRST, MIDDLE NAME) [] MINOR

ADDRESS

ADDRESS TELEPHONE NUMBER

CUSTODIAN OF DOG (LAST, FIRST, MIDDLE NAME)

ADDRESS

ADDRESS TELEPHONE NUMBER

NAME OF PARENT/LEGAL GUARDIAN OF MINOR DOG OWNER

ADDRESS

ADDRESS TELEPHONE NUMBER