

## Department of Parks, Recreation and Neighborhood Services

ANIMAL CARE & SERVICES DIVISION

## **NOISY ANIMAL REBUTTAL FORM**

(Please Print Clearly)

Date:	Case No.:	
Name of Owner:		
	Zip Code:	
Home Ph: ( )	Work. Ph: <u>(</u> )	
Name of Animal(s):		
Description of Animal(s):	ame, sex, age, color, breed)	
Explanation/Comments/Rebutta	ame, sex, age, color, breed) Il regarding a barking dog complaint filed against you:	

(Attach a separate sheet of paper if extra space is needed)

Please Mail or Fax To:

City of San Jose

Animal Care & Services Division 2750 Monterey Road San Jose, CA 95111 (408) 229-2122 Fax