

## INSTRUCTIONS FOR COMPLETING THIS WITNESS STATEMENT

1. Include the **Animal Care and Control case number** on the upper right hand corner.
2. Please be as accurate and detailed as possible in outlining the incident as it unfolded. Include facts regarding: **date, time, location, identity of persons and animals present, behaviors exhibited**. (*Pleas/ demands for action do not constitute evidence and do not further an investigation.*)
3. It would be helpful to attach **any photos or medical documentation of injuries to you or your pet**. It is not necessary to include billing statements but rather any records of medical treatment provided. (Any photograph or record submitted will become a public record subject to disclosure pursuant to a public records request.)
4. If this incident was reported to a police agency, please specify the agency and the case number so we can obtain the report and provide a copy of the report, if possible.
5. If you are reporting an incident to serve as background for the current case, was it reported to Animal Care and Control at the time of occurrence? What was the case number?
6. **This statement must be signed and notarized and the original returned to our agency within 48 hours**. Please note that the timely return of this statement is very important. If there are extreme circumstances (e.g. you remain hospitalized as a result of the attack), please have someone contact our office to advise of the delay. Receiving all witness statements in a timely manner will assist in the correct and timely resolution to this case. In some instances, cases may be closed due to non-receipt of witness statements. In completing this affidavit you may be requested to testify at an administrative hearing.

**We appreciate your cooperation in assisting Palm Beach County Animal Care and Control in this matter.**

**Please return the original notarized witness statement to:**

**ATTN: Special Investigations Unit  
Palm Beach County Animal Care and Control  
7100 Belvedere Road  
West Palm Beach, FL 33411**

## **Overview of the Aggressive/Dangerous/Vicious Dog Investigation Process:**

*\*\*\* No dog shall be legally classified without a sworn statement submitted by a witness to the incident being investigated.*

1. Dog-to-human bite cases and dog-to-domestic animal attacks are reviewed by a Dangerous Dog Coordinator (DDC). This investigation may run beyond the quarantine period.
  - a. If the dog is impounded at Animal Care and Control (ACC) for quarantine for a human bite, the dog may be required to stay at ACC after the 10-day quarantine period until the investigation is complete. Contact the DDC about the status of your case prior to trying to redeem your dog.
  - b. If the dog remains with the owner during the investigation, the dog shall not be relocated or ownership transferred pending the outcome of the investigation and any appeal proceeding. If the owner moves while the investigation/case is still open, he/she must contact the DDC beforehand to advise of the new address.
2. The DDC reviews the reports, photographs, medical records and witness statements to determine if an “Aggressive”, “Dangerous” or “Vicious” classification is warranted according to Ordinance 98-22 Section 27 and/or Chapter 767, Fla. Stat. The DDC will contact the owner of the dog to be classified if a classification is pursued.
3. If a classification is warranted, an “Intent to Classify” letter must be delivered to the dog owner by registered mail, certified hand delivery or service of process.
4. The options available to the owner are determined by the level of classification and will be explained to the owner. Additional fees may apply for some classifications.
5. If the owner files an appeal, a hearing will be scheduled at ACC within 5 – 21 calendar days from the appeal date. All parties will be notified of an appeal hearing.





**Under penalties of perjury, I declare that I have read the foregoing statement and that the facts stated in it are true.**

**I understand that I may be called as a witness in a court of law.**

\_\_\_\_\_  
Print Full Name

\_\_\_\_\_  
Address

\_\_\_\_\_ Home Phone                      Work/Cell Phone

\_\_\_\_\_  
Signature

State of Florida – County of Palm Beach	
The foregoing instrument was acknowledged before me	
this _____	(Date)
by _____	who is
personally known to me or has provided _____	
as identification and who did take an oath.	
_____	
Signature	Commission No.
_____	
Name of notary (typed, printed, or stamped)	