



# CITY OF WHEELING

City Manager's Office  
City-County Building, Room 302  
1500 Chapline Street  
Wheeling, WV 26003

## AFFIDAVIT OF COMPLAINT

### FOR DECLARATION OF DANGEROUS OR VICIOUS DOG

Complainant's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

I, \_\_\_\_\_, hereby request that the City Manager investigate and, if valid, determine the dog(s) described below be declared dangerous or vicious.

Description of Complaint: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use Additional Pages As Needed)

Date of Occurrence: \_\_\_\_\_ Time: \_\_\_\_\_ (Note if more than one occurrence)

Description of Dog:

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_

Do you know or have knowledge of the dog's owner?: Yes \_\_\_\_\_ No: \_\_\_\_\_

Can you provide a photograph of the dog?: Yes \_\_\_\_\_ No \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

I understand that by giving this sworn statement it will be necessary for me to appear before a court of competent jurisdiction if the dangerous or vicious dog determination is appealed.

Complainant's Signature \_\_\_\_\_ Date \_\_\_\_\_

State of WV  
County of Ohio

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by

My Commission Expires:

\_\_\_\_\_  
Notary Public