

**Payinthe**

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# Application to Council Barking Dog Problem

## 1. Applicant's Details

Given Name \_\_\_\_\_

Family Name \_\_\_\_\_

Street Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Postal Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Home Telephone \_\_\_\_\_ Business Telephone \_\_\_\_\_

Mobile \_\_\_\_\_

Email \_\_\_\_\_

## 2. Dog Description (if known)

Address dog(s) kept at \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Owner's Name \_\_\_\_\_

1<sup>st</sup> breed of dog \_\_\_\_\_ Colour \_\_\_\_\_

2<sup>nd</sup> breed of dog \_\_\_\_\_ Colour \_\_\_\_\_

## 3. Barking dog details

Describe the dog's barking and why it is a nuisance to you (use the checklist below to assist you)

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li>• How often does the dog bark?</li><li>• How long does the barking continue for?</li><li>• What sort of noise does the dog make?</li><li>• Does it bark at certain times of the day?</li><li>• Does it bark in response to passers-by or other stimulus?</li></ul> | <ul style="list-style-type: none"><li>• Where is the barking in relation to your property?</li><li>• Does the barking interfere with any of your normal activities?</li><li>• Does the barking impact on your health or wellbeing?</li><li>• How does the barking impact on other members of your household?</li></ul> |
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