## Animal Services Affidavit Instructions

- 1. Complete fillable affidavit on next page in its entirety.
- 2. Be sure to include your name, address, and contact numbers.
- 3. Affidavit must have at least the defendant's accurate home address on it.
- 4. It is important to include the who, what, when, and where without speculation as to why.
- 5. Please submit one affidavit per offense. Meaning only one date and one time of offense should be listed on your affidavit.
- 6. Make sure to notate the location of offense.
- 7. Taking pictures or video of violations is strongly suggested.
- 8. Two witnesses are better than one.
- 9. Please describe animals accurately.
- 10. Fill in the narrative portion. Be as descriptive as possible as to what occurred.
- 11. Take affidavit before a notary public and have the document notarized. Animal Services offers notarization with appointment.
- 12. If Yellow copy is available, retain for your records.
- 13. When complete, mail to address below:

**Alachua County Animal Services** 

3400 NE 53rd Ave

Gainesville, FL 32609

IF YOU HAVE ANY QUESTIONS, CONTACT US AT 352-264-6880.



## ALACHUA COUNTY ANIMAL SERVICES 3400 NE 53RD AVE. GAINESVILLE, FL 32609 (352) 264-6870

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CITATION # \_\_\_\_\_

Alachua County	GAINESVILLE, FL 32609 (352) 264-6870			ACTIVITY #				
Alachua County, Florida				DATE	, 20			
Person Making Statement	Last Name	First Name	MI	Buisness/Cell Phone	Home Pl	hone		
Address				City	State	Zip		
Defendant				•				
Date <b>YOU</b> observed the offense(s)	Name Add	ress Time <b>YOU</b> obs	City served the offense(s)	State	Zip			
	(-)		•	,				
Location that <b>YOU</b> observed the off BREED OF ANIMAL	ense(s)	COLOR		MALE	EEMA	1.5		
REED OF ANIIVIAL		COLOR		MALE	FEIVIA	FEMALE		
any persons whomsoever:								
Notary Stamp				Please attach a	additional pages as	s necessary		
Sworn to and Subscribed before me		I swear or affirm that the statements contained herein are true and correct to the						
.i	00		knowledge and	I belief.				
of	20	—— <b> </b>						
Signature		Signature _			Date			
My Commission exp	ires		White - ∩t	ffice Copy Yell	ow - Complainant	Copy		
, остиностоп охр					Jopiamant	,		