

**JUSTICE COURT OF THE STATE OF NEW YORK
INC. VILLAGE OF MANORHAVEN**

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PEOPLE OF THE STATE OF NEW YORK, : **INFORMATION**
:
-against- :
:
_____, :
Defendant. :
-----X

The undersigned Complainant swears and/or affirms to the truth of the following under the penalties of perjury:

COMPLAINANT: (First and Last Name and Full Address Required)	Dog Owner: (First and Last Name and Full Address Required)	
Phone Number and Email Address	Phone Number and Email Address (if known)	
Animal (LIST ONE ANIMAL ONLY) Breed or Specific Description of Animal including Color – Required	Name of Animal (if known)	
<u>VILLAGE CODE VIOLATION ALLEGED – CHAPTER 54 DOGS & OTHER ANIMALS</u>		
<input type="checkbox"/> §54-7 – Running at Large <input type="checkbox"/> §54-8(A) – Habitual loud howling or barking <input type="checkbox"/> §54-8(C) – Chase or harass – Running at Large <input type="checkbox"/> §54-8(D) – Habitually chase or bark at motor vehicles <input type="checkbox"/> §54-9(A) – Allow dog to defecate, urinate or commit a nuisance on public property <input type="checkbox"/> §54-9(A) – Allow dog to defecate, urinate or commit a nuisance on private property w/o owner’s consent <input type="checkbox"/> §54-9 (B) – Failure to remove feces deposited by dog		
Specific Location Violation occurred	Date of Incident	Time of Incident
Statement of Facts (Please give a narrative of incident that occurred)		

If additional space is needed to complete the statement of facts, please use additional sheets.

**Initial by
Complainant**

_____ I understand that I will be required to appear at the Village Justice Court to present my testimony in support of this information

_____ I understand that the Defendant herein will be permitted to cross-examine me in the course of my testimony

_____ I personally observed the commission of the offense charged above.

_____ I understand that false statements made herein may be punishable as a Class A Misdemeanor pursuant to Section 210.45 of the Penal Law of the State of New York

Dated: Manorhaven, New York
_____, 20____

{signature}

{printed name}

{address}

STATE OF NEW YORK: COUNTY OF NASSAU Ss.:

On the _____ day of _____, 20____, before me personally appeared _____, the Complainant herein, who signed and swore or affirmed to the truth of the statements herein, and that the Complainant was either personally known to me or proved on the basis of satisfactory evidence that they were the individual named herein.

Notary Public