

KITSAP HUMANE SOCIET

INVESTIGATIVE STATEMENT DECLARATION

Please read this cover letter before you complete the attached forms. Keep this cover letter for your records.

Instructions/Warnings.

Legal Statement:

- **Complaint.** Any statement made in writing or verbally to a sworn a. Washington Animal Control Officer constitutes a legal statement which supports or refutes a complaint made against another person(s).
- b. **Statement.** Any statement made becomes part of a law enforcement investigative record and is subject to public disclosure law(s). See #2d.
- **Truth.** Any statement made to a law enforcement officer that is c. knowingly false shall be referred for prosecution under RCW 9A.76.020 (obstruction) and is a gross misdemeanor punishable by not more than \$5,000 and/or 365 days in jail.

2. Investigation:

- **Process.** Any investigation is open-ended, meaning that there may be other a. documents/statements or information used while preparing a case. Complainants are advised that the accused in a complaint may be asked to respond to any allegations made against them or their animal(s). Once an investigation is complete, legal action through the courts may be Initiated. Animal Control Officers will not call you with updates.
- **Charges.** Any applicable charges assessed from infractions, b. Misdemeanors or court ordered removals/fees of an animal that becomes a judgment of the court system must be appealed in a timely fashion. Felony charges are instituted through the Kitsap County Prosecutors Office.
- Court. Any appeal of chargeable offenses issued by Kitsap Animal c. Control must be made to the court of jurisdiction prescribed in the charging document or citation.
- **Records.** All statements made verbally or in writing to Kitsap Animal Control d. are subject to subpoena by the applicable court's jurisdiction or its officers. Other law enforcement agencies may be given Kitsap Animal Control's case file or documents. If you are requesting a copy of the case, please submit a formal public records request.

• Specialized code enforcement • 24/7 emergency call response

Animal cruelty investigations

Assistance to fire, medical and police

• Small-large disaster planning/response

Removal of pets/livestock from roads

• K-12 and public education

P: 360.692.6977 ext: 1208 FAX: 360.698.9668

Emergency: 911

9167 Dickey Rd NW, Silverdale, WA 98383

Rehabilitate. Rescue. Rehome.

Kitsap Humane Socie

Time Limits. Once a case is open by Animal Control for investigation, there is no e. time limitation of Animal Control to close any case.

3. Forms.

- **Investigative Statements.** All forms must adhere to the following requirements: a.
 - This statement must be as complete as possible. (1)
 - The statement must be as factual as possible, see 1 C above. The statement must (2) be based on first-hand observation; not the word/opinion of others.
 - (3) Use a pen (black or blue ink only, no pencil).
 - (4) Put any additional information on a separate sheet of paper if necessary. Make sure to sign and date any additional paper being used.
 - (5) Print or write as legibly as possible as the courts may use this statement.
 - Put maps/diagrams on separate sheets of paper. (6)
 - **(7)** Photos, usb drives, cd's or other documents cannot be returned, so copies are acceptable.
 - Make only copies of completed forms which you want to keep. It is unlawful to (8) copy/use a law enforcement document for purposes or by persons other than instructed or intended.
 - (9) The statement and any other included document must be signed and dated.
 - (10)The statement must be returned within fourteen calendar days of receipt to be considered timely in a current investigation. Cases may be closed if statements are received after 14 calendar days from receipt.
 - (11) Animal Control reserves the right to close any case where no written statement is returned upon request, even if legal action was requested.
 - If no legal action was requested to be taken that does not guarantee that legal action won't be taken at the discretion of the investigating officer.
 - (13)Once a case has been closed and if concerns persist a new report shall be submitted to Kitsap Animal Control through 911.

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INVESTIGATIVE DECLARATION STATEMENT

(READ INSTRUCTIONS/WARNINGS BEFORE COMPLETING)

Case #:	Officer:		
S	Statement of (check one): Subject:	Witness:	Complaintant:
	Or "Other" (police,	fire, medical, et	tc.)
Please be advised	that your testimony/statement may	be needed if co	ourt action is pursued, there also
•	hat you could be subpoenaed to co	•	
_	teed in court or in an appeal hearing	_	
subject to public o	disclosure, so any supplied documen	ts are subject to	public records laws and or release.
Your Name:			
	Last	First	MI
Street Address/Ap	ot #		
			
City	County	State	Zip
Your Phone(s): Co	ell Home		
	Are you the age of 18 years o	or older: Yes:	or No:
	, c		
*Are you requ	nesting Kitsap Animal Control to t	take legal actio	n: Initial Yes: or No:
	(Requesting legal action does not	mean legal acti	on will be taken)
*Are you will	ing to testify in a court of law to tl	nis information	: Initial Yes: or No:
	(This is required for Animal	Control to take 1	legal action)

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Time(s) of incid	lent:				
Place of inciden	nt (describe location	on):			
Incident occurre	ed on Private:	or I	Public Prop	erty:	
	a bite that broke				
•			111		
If you answered	l ves, describe the	bite ar	nd where th	ne injury was inflicted:	
ii you unsweree	i yes, deserree the	one un	ia where th	e injury was inflicted.	
Victim Status:		3.7			
vietim Status.	Invited Guest:	Y	_/N	<u>Pedestrian</u> Y /N	
vietini status.	Invited Guest: Utility Worker			Pedestrian Y /N Delivery Agent Y /N	
victili status.		Y	_/N		
vicini status.	Utility Worker	Y Y	_/N _/N	Delivery Agent Y /N	
victili status.	Utility Worker Solicitor	Y Y Y	_/N _/N _/N	Delivery Agent Y /N Police Officer Y /N	
	Utility Worker Solicitor Neighbor	Y Y Y	_/N _/N _/N _/N	Delivery Agent Y /N Police Officer Y /N Stranger Y /N	
	Utility Worker Solicitor Neighbor Other	Y Y Y	_/N _/N _/N _/N	Delivery Agent Y /N Police Officer Y /N Stranger Y /N	
Please describe	Utility Worker Solicitor Neighbor Other	Y Y Y Y f they	_/N _/N _/N _/N	Delivery Agent Y /N Police Officer Y /N Stranger Y /N	
Please describe	Utility Worker Solicitor Neighbor Other your animal(s) i	Y Y Y Y f they	_/N _/N _/N /N were invo	Delivery Agent Y /N Police Officer Y /N Stranger Y /N Ived:	[

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Subject animal(s) description if involved (complete for each animal if known):

1.)		
Species:		
Breed:	Sex:	
	Collar Y /N	
Tail (long/short):	Name (if known):	
	Tag(s) (describe):	
Other identification (d	lescribe):	
2.)		
Species:		
Breed:	Sex:	
Color(s):	Collar Y /N	
Tail (long/short):	Name (if known):	
	Tag(s) (describe):	
Other identification (d	lescribe):	
`		
3.)		
Species:		
Breed:	Sex:	
Color(s):	Collar Y /N	
Tail (long/short):	Name (if known):	
	Tag(s) (describe):	
	lescribe):	
`		
Subject Animal Own	ner information:	
Last	First	MI
Subject Animal Owne	er Address:	
Subject Animal Owne	or Phone Number	
Subject Ammai Owne	1 Hone mumber.	
	Photo(s) Available: Y /N Included: Y /N	
	Documents/Information: Y /N Included: Y /N	
	Documents/information. I /N Included. I /N	

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Other person(s) who have important information concerning this case/incident you are reporting.

Name:				
Last	Firs	st	MI	
Streer Address/Apartment #				
City	County	State	Zip	
Phone(s): Cell	Home			

For your case you may attach maps, drawings, medical records, or other documentation as needed. Any photos, videos, or audio tapes will not be returned if supplied to animal control. If you are drawing maps, please draw or provide these items on a separate sheet of paper in which you have signed and dated.

For the narrative, please describe <u>ONLY</u> in detail what you witnessed or can declare to be true about this case/incident. If more space is needed, attach additional pages including the case number if known.

Narrative:

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Continued:

I hereby certify or declare under penalty of perjury under the laws of the state of Washington that
the foregoing and/or attached are true and correct, to the best of my knowledge and belief.

	Date:
(Signature of complainant/witness or subject)	
(Signature of Parent or Guardian if under 18 years of age)	Date:
Place signed: City/County/State	

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