

ATTORNEY OR PARTY WITHOUT ATTORNEY: NAME: FIRM NAME: STREET ADDRESS: CITY: TELEPHONE NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	STATE BAR NUMBER: STATE: ZIP CODE: FAX NO.:	FOR COURT USE ONLY
COURT OR AGENCY: STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:		
PETITIONER: RESPONDENT:		
ORDER AFTER HEARING (Menacing Dog)		
		CASE NUMBER:

The proceeding was heard as follows:

1. a. Date: Dept.: Room:
 b. ☐ Judge (name): Hearing officer (name):
 c. ☐ Petitioner present ☐ Attorney present (name):
 d. ☐ Respondent present ☐ Attorney present (name):
2. ☐ Respondent presented evidence as to why the dog should not be declared potentially dangerous or vicious.

THE ☐ COURT ☐ AGENCY FINDS AND ORDERS

3. The **dog** is described as follows (briefly describe dog and give license number, if available):

4. a. ☐ The **owner** of the dog is (name):
 b. ☐ The **keeper** of the dog is (name):
5. The **dog**
 - a. ☐ is ☐ is not potentially dangerous.
 - b. ☐ is ☐ is not vicious.
6. a. ☐ **Potentially dangerous dog**
 - (1) ☐ The dog shall be properly licensed and vaccinated, and the licensing authority shall include the "potentially dangerous" designation in the dog's registration records.
 - (2) ☐ The dog, while on the owner's or keeper's property, shall at all times be kept indoors or in a securely fenced yard from which the dog cannot escape, and into which children cannot trespass. The dog may be off the owner's or keeper's property only if it is restrained by a substantial leash, of appropriate length, and only if it is under the control of a responsible adult.
 - (3) ☐ If the dog dies, or is sold, transferred, or permanently removed from the city or county where the owner or keeper resides, the owner shall notify the animal control department of the changed condition and new location of the dog within two working days.
 - (4) ☐ Other (specify):
- b. ☐ **Vicious dog**
 - (1) ☐ Releasing the dog would create a significant threat to the public health, safety, and welfare (check one):
 - (i) ☐ The dog shall be destroyed by the animal control officer.
 - (ii) ☐ The following conditions are imposed on the ownership of the dog to protect the public health, safety, and welfare (specify):

(Continued on reverse)

PLAINTIFF: DEFENDANT:	CASE NUMBER:
--------------------------	--------------

6. b. (continued)

- (2) ☐ (i) Continued ownership or possession of ANY DOG by the dog's owner or keeper would create a significant threat to the public health, safety, and welfare.
- (ii) The ☐ owner ☐ keeper named in item 4 is prohibited from owning, controlling, or having custody of any dog for a period of *(specify)*: _____ from the date this order becomes final.
- (3) ☐ The following conditions are imposed on the ownership of the dog *(specify)*:
- (4) ☐ Other *(specify)*:

7. **Time to comply.** *(Name)*: _____ must comply with this order in accordance with the time schedule, if any, established by the animal control department or local law enforcement agency, BUT NOT more than 30 days from the date of this order (35 days if this order is mailed to you).

8. **Appeal.** If you disagree with this determination, you may, within five days after you receive this order, appeal the decision to the superior court at *(address)*:

Date:

(SIGNATURE OF JUDGE OR HEARING OFFICER)**CLERK'S CERTIFICATE OF MAILING**

I certify that I am not a party to this cause and that a copy of the **Order After Hearing** (Menacing Dog) was mailed first class, postage fully prepaid, in a sealed envelope to each person whose name and address is shown below, and that the order was mailed

at *(place)*: _____, California.

on *(date)*:

Clerk, by _____, Deputy

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>