



## TOWN OF CRESTON

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Phone: 250-428-2214 \* Fax: 250-428-9164  
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# Barking Log Sheet

Bylaw No: \_\_\_\_\_

(dd/mm/yy)

\*Enter date of each occurrence

Logs must be submitted on a weekly  
basis for minimum of 2 weeks

Date	Barking begins (i.e. 8:15 am)	Barking stops (i.e. 8:28 pm)	Was this observed (Y/N)	Location? (i.e. backdoor, at gate)	Disturbance? (i.e. gardening, sleeping, etc.)	Motivation? (i.e. passerby, other dogs, traffic, none)

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_

Drop Off at Town Hall or email to: [dwayne.mackenzie@creston.ca](mailto:dwayne.mackenzie@creston.ca)