ATTORNEY OR PARTY WITHOUT A	TTORNEY (Name and Address):	TELEPHONE NO.:	FOR COURT OR AGENCY	USE ONLY
<del>_</del>				
ATTORNEY FOR (Mama)				
ATTORNEY FOR {Name}:  COURT OR AGENCY:				
STREET ADDRESS:				
MAILING ADDRESS:				
CITY AND ZIP CODE:				
BRANCH NAME:				
PETITIONER:				
RESPONDENT:				
	NOTICE OF HEARING		CASE NUMBER:	
	On Petition To Determine If Dog Is			
	Potentially Dangerous Viciou	IS		
1 NOTICE is given that no	atition or (name)			
NOTICE is given that per	etitioner ( <i>name)</i> :			
(representative capacit	y, if any):			
has filed a <b>Patition to</b>	Determine If Dog Is Potentially Dange	erous or Vicious Con	ies of the netition and suppo	ortina documente
are attached to this noti		erous or vicious. Cop	ies of the petition and suppo	ording documents
2. A HEARING on the mat	ter will be held as follows:			
Date:	Time: D	ept.: Roc	om:	
Address of court or age		5pt K00	лн.	
	i, and the majore			
3 At the hearing you may	present evidence as to why the dog sho	uld not be declared not	entially dangerous or vicious	Failure to
	may result in an order terminating or	· ·		s. I allule to
	, and the second	0, 1	<b>U</b>	
	Г			
	DO NOT BRING THE	DOG TO THE H	EARING	
Date:		Clerk, by		, Deputy
				, - 5, 113
		<b>□</b> .		
	DR PRINT NAME)	Agency	(SIGNATURE)	
		_	(TITLE)	
			(TITLE)	
		_	(TELEPHONE NUMBI	ER)
	(Proof of Serv	ice on reverse)		

PETITIONER:	CASE NUMBER:			
RESPONDENT:				
PROOF OF SERVICE  Petition to Determine If Dog Is Potentially Dangerous or Vicious  Personal Service Certified Mail				
Service of the notice on the other party may be made by one of the following ways  (1) Personally delivering these papers to the other party.  OR  (2) Mailing the papers by certified mail return receipt requested, postage prepaid				
1. At the time of service I was at least 18 years of age and <b>not a party to this lega</b>	I proceeding.			
I served copies of the following papers in the manner shown below:     a. Papers served: Petition to Determine If Dog is Potentially Dangerous or V Hearing.	licious with supporting documents and Notice of			
<ul> <li>b. Manner of service (check and complete either (1) or (2) below)</li> <li>(1) Personal service I personally delivered these papers to the owner</li> <li>(a) Name:</li> <li>(b) Address where served:</li> </ul>	er or keeper of the dog as follows:			
(c) Date served: (d) Time served:				
Certified mail return receipt requested I deposited these papers in the United States mail, in a sealed envelope with postage fully prepaid. I used certified mail and requested a return receipt. The envelope was addressed ar mailed to the owner or keeper of the dog as follows: <ul> <li>(a) Name:</li> <li>(b) Address:</li> </ul>				
<ul><li>(c) Date of mailing:</li><li>(d) Place of mailing (city, state):</li><li>(e) I am a resident of or employed in the county where the notice of the county where the county w</li></ul>	was mailed.			
3. My residence or business address is (specify):				
I declare under penalty of perjury under the laws of the State of California that the	foregoing is true and correct.			
Date:				
(TYPE OR PRINT NAME OF PERSON WHO SERVED THE NOTICE)	(SIGNATURE OF PERSON WHO SERVED THE NOTICE)			
4. Telephone number of person who served the notice:				