

AFFIDAVIT

(Please Insert Name of Nuisance Establishment)

I hereby depose and state that on this date _____; the following facts are true and correct to the best of my knowledge, information, and belief:

1. My name is _____.
2. I have lived at _____,
Reading, PA, 19____ since ____/____/____.
3. My telephone number is _____.
4. I work at _____.
5. My usual work hours are _____.
6. During the week I am usually home from: _____ to _____.
7. On the weekends I am usually home from: _____ to _____.
8. Other pertinent information about my background is:
(please describe in detail)
9. I live approximately _____ feet from _____,
(nuisance establishment)
located at: _____
_____, Berks County, Pennsylvania.
10. I can see the operations of this establishment:
_____ from my window
_____ when going to and from home (please explain when):

Exhibit "B"

_____ when I happen to pass by on the street

_____ at other times (please describe in detail)

11. I hear the operations of this establishment:

_____ in my house (describe what you hear and when you hear it):

_____ when going to and from home (describe what you hear and when you hear it):

12. Please describe in detail all other information pertaining to your ability to see and hear the operations of this establishment, including but not limited to what side of the building you are capable of seeing and/or from what side of the establishment any noise might originate:

13. I have personally seen people inside this establishment engaging in: (Please include any details including how often, what time of day or night, and any specific dates you can recall).

a. _____ the sale of illegal drugs, such as marijuana, cocaine, crack, heroin.

b. _____ the use of illegal drugs, such as marijuana, cocaine, crack, heroin.

c. ____ the commission of other types of crimes

d. ____ damaging of property

14. I have personally seen people going to and from the establishment who: (Please include any details including how often, what time of day or night, and any specific dates you can recall).

(Check all that apply)

____ appeared to be less than twenty-one years old.

____ are known to be less than twenty-one years old.

____ drink alcoholic beverages outside.

____ appeared to be intoxicated.

____ are known alcoholics.

____ are known criminals.

____ appeared to be selling illegal drugs.

____ appeared to be using illegal drugs.

___ urinated.

___ vomited.

___ littered.

___ had sexual relations.

___ harass others who pass by.

___ engaged in fighting.

___ engaged in loud arguing.

15. I have seen drug paraphernalia strewn about the establishment:

___ never ___ once ___ several times ___ regularly

16. I have personally heard loud music come from this establishment:

___ never ___ once ___ several times ___ regularly

17. The operation of this establishment has disturbed the quiet use and enjoyment of my home because:

___ its music has kept me awake

___ once

___ several times

___ regularly

___ its patrons have kept me awake

___ once

_____ several times

_____ regularly

18. The following is a description of specific noise related incidents that I can recall today:

19. The operation of this establishment has disturbed my quiet enjoyment of the public streets because:

(check all that apply)

___ I am afraid to go out at night as a result of the conduct of the patrons

___ a patron or patrons have threatened me

___ a patron or patrons have harassed me

___ a patron or patrons have injured me

___ a patron or patrons have damaged my property

20. The following is a description of specific incidents that I can recall that have disturbed my enjoyment of the public streets in the vicinity of this establishment:

21. I have called the police _____ time(s) in relation to this establishment, and I can remember the following specific incidents that prompted my call(s):

22. My contacts with the employees and/or proprietors of this establishment have been:

23. The negative impact of this establishment upon me and my neighbors is:

___ not serious ___ serious ___ very serious ___ unlivable

24. I believe that the operations of this establishment have reduced the value of my:

___ property
 ___ not at all ___ slightly ___ significantly

___ leasehold
 ___ not at all ___ slightly ___ significantly

25. I believe that if the operations of this establishment are allowed to continue, then the resulting negative impact on the community will be:
(attach additional pages if necessary)

26. I verify that the statements in this Affidavit are true and correct to the best of my knowledge. I understand that any false statements made herein are made subject to the penalties of 18 Pa.C.S.A. §4904 relating to unsworn falsifications to law enforcement authorities.

Signature

Print name

Date