



Calais Town Office  
3120 Pekin Brook Rd  
East Calais, VT 05650  
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## COMPLAINT OF VIOLATION OF DOG ORDINANCE

Name(s) of Complainant: \_\_\_\_\_

Address of Complainant: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Owner of dog involved in incident: \_\_\_\_\_

Address of owner of dog: \_\_\_\_\_

Date of incident: \_\_\_\_\_

Description of incident (including location of incident and whether a person or animal was injured as a result of the incident)

Was medical treatment necessary as a result of the incident? \_\_\_ Yes \_\_\_ No

Did you notify the Animal Control Officer? \_\_\_ Yes \_\_\_ No

Did you notify the State Police? \_\_\_ Yes \_\_\_ No Trooper Name: \_\_\_\_\_

Have you spoken to the owner of the dog involved? \_\_\_ Yes \_\_\_ No

Did you notify the Town Health Officer \_\_\_ Yes \_\_\_ No

Is there anything you want to add that might be helpful to the Selectboard in consideration of your complaint?