APPLICATION FOR HEARING WITH RESPECT TO NOTICE TO MUZZLE/DANGEROUS DOG DECLARATION
Town of New Tecumseth Dangerous Dog By-law No. 2002-045

This appeal form shall be delivered to the Clerk/Director of Administration Services within thirty (30) days after the Notice to Muzzle has been served.

Attn: Municipal Law Enforcement
10 Wellington Street East
Alliston, Ontario L9R 1A1

1. Dog Owner:

Name: _____

Address: _____ Postal Code: _____

Phone: _____ email: _____

2. Details of Dog Deemed Dangerous:

Dog's Name _____ Dog Tag #: _____

Breed: _____ Colour: _____

Age: _____

3. Reason for request for Hearing (If additional space is required, please attach additional pages to this form):

_____

_____

_____

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_____

4. Please advise who will be attending the Hearing

_____

_____

_____

The information contained in this Application is true to the best of my knowledge.

_____ _____

Signature of Dog Owner Date