



CITY OF GARDNER
 ANIMAL CONTROL DIVISION of the
 GARDNER POLICE DEPARTMENT

ANIMAL CONTROL VIOLATION APPEAL FORM

Notice #	Date of Notice	Name:		
		Address:		
Date of Appeal	Ordinance Cited	City:	State:	Zip:
		Telephone Number (daytime):		

To the Animal Control Officer,
 I hereby appeal the above numbered alleged animal control violation in the City of Gardner. After carefully considering the facts relating to this violation, I believe I have fair and just reason to appeal and obtain cancellation. I understand that if I am not satisfied with the Animal Control Officer's response, I have the right to appeal at district court.

REASON(S) FOR APPEAL (Please write legibly. Use additional sheets if necessary):

SIGNATURE: _____

◆.....◆
 Your appeal has been reviewed. You are hereby advised: (see block checked)

- To pay the violation fee of \$_____ immediately. Failure to comply in a timely manner will result in additional action by the Animal Control Officer and the City of Gardner.
- Based upon evidence provided, your appeal has been approved, no further action is required.

Explanation: _____

Animal Control Officer's Signature: _____

Room 217 - City Hall
 95 Pleasant Street
 Gardner, MA 01440-2687

Telephone (978) 632-3810
 Fax (978) 632-9320

PARKING OFFICE USE ONLY Date of return notice: _____
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