

Trevor Karl  
Dog Control Officer  
518-946-2105 ext 303  
518-946-7174 ext 301

Town of Wilmington  
P.O.180  
7 Community Center Circ  
Wilmington, N.Y. 12997



## Dog Complaint Form

Date: \_\_\_\_\_

**Complainant (person making complaint)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Nature of complaint: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Dog Owner Information**

Name: \_\_\_\_\_

Address (required): \_\_\_\_\_

**Please submit via the following methods:**

Mail: PO Box 180

Fax: 518-946-7124

Email: [wilmingtondogcontrol@townofwilmington.org](mailto:wilmingtondogcontrol@townofwilmington.org)

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**Dog Control Officer Use Only**

Investigative Outcome: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Ticket Issued: Yes \_\_\_\_\_ No \_\_\_\_\_

DCO Signature: \_\_\_\_\_ Date: \_\_\_\_\_