

DOG SEIZURE AND DISPOSITION RECORD

Month/Year _____

Town, City or Village _____

Seizing Officer Name _____

Shelter Name _____

County _____

Dog Control Record Number	License ID Tag/ Other ID Number	Breed	Sex	Color(s)	Age	Date, Hour, & Location of Seizure	Seizure Code	Req'd Fees- Total Amt. Paid	Disposition Date & Destination	Redeemed	Adopted	Euthanized	Transferred
								\$					
								\$					
								\$					
								\$					
								\$					
								\$					
								\$					
								\$					
								\$					
								\$					

SEIZURE CODES (1-6 are AML):

- | | | |
|------------------------------------|--------------------------|------------------------------------|
| 1. Unidentified & at large §117.1a | 4. Unlicensed §117.1b | 7. Threat to public safety §117.1c |
| 2. Unlicensed §117.1b | 5. Night Quarantine §121 | 8. Night Quarantine §121 |
| 3. Threat to public safety §117.1c | 6. Dangerous dog §123 | 9. Other (state reason) |