

TOWNSHIP OF CAMBRIDGE

22533 ELECTRIC DRIVE, CAMBRIDGE SPRINGS, PENNSYLVANIA 16403

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DOG ORDINANCE COMPLAINT FORM

This form may be used to file a complaint pursuant to the Cambridge Township Dog Ordinance. Please type or print legibly all requested information and return to the Municipal Building.

Cambridge Township Supervisors adopted Ordinance #005-1997 Series on 12/31/97 prohibiting dogs from running at large, declaring that certain activities of dogs constitutes a public nuisance; and establishing minimum standards of care for dogs; providing for the disposition and impoundment of unrestrained dogs; and prescribing penalties for violation.

NOTICE: **Any dog which -**

1. Molests passerby or passing vehicles;
2. Is repeatedly not under restraint;
3. Damages private or public property; or,
4. Barks, cries, whines or howls in an excessive, continuous, or untimely fashion,

is and shall be considered a public nuisance. The ownership of any animal which constitutes a public nuisance is punishable by penalties as follows: Upon conviction thereof in an action brought before a District magistrate, summary offenses under the PA Ruses of Criminal Procedure, shall be sentenced to pay a fine of not more than \$1,000 plus costs and in default of payment of said fine and costs, to a term of imprisonment not to exceed ninety (90) days.

Enforcement: Violations shall be instituted and prosecuted by the citizens aggrieved by such violations. (The Township resident who files the complaint must file charges with the District Magistrate.)

District Justice Lincoln Zilhaver
2100 Independence Drive
Court Facility
Saegertown, PA 16433
Telephone: 814-763-2222

A complaint has been expressed at the Township against a dog owned by you for reasons indicated below. Please make every effort to alleviate this problem so that your neighbor is not forced to bring formal charges against you with the District Magistrate. Thank you for your cooperation in resolving this problem peacefully.

Dog Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Complaint: _____
