	STATI	E OF MAINE	
DEPARTMENT	OF AGRICULT	URE, CONSERV	VATION & FORESTRY
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ANIMAL WELFARE PROGRAM

28 STATE HOUSE STATION AUGUSTA, MAINE 04333

AMANDA E. BEAL COMMISSIONER

2023 Municipal Update Form

Municipality:	Phone:				
Pop Size: Avg Do	g Licenses Sold:	Fax:			
Email:	INFORME Online	e Email:			
Mailing Address:					
Town Website Address:		_ Is Dog Info on Website:	YES or NO		
Clerk:	Dep. / Asst. Clerk ij	^c Clerk unavailable:			
Days (cross out days closed): MON TUE	E WED THURS FRI	Office Hours:			
Name of Contracted Animal Shelter:					
Is your municipality part of a regional Anin	YES or NO				
If yes – Who / where is your contract with:					

Date of last monthly report submitted to Animal Welfare:

7 § 3949. Animal shelter designation

JANET T. MILLS

GOVERNOR

1. Municipal clerks, annually, on or before April 1st, shall certify to the commissioner the name and location of the animal shelter with which the municipality has entered a contract to accept stray animals or have an arrangement for an animal shelter that will accept stray animals. Animal shelters designated by the municipality under this section must comply with commissioner rules. 2. A municipality may contract with an animal shelter licensed under section 3932-A for other animal control services. A municipality may not contract with a shelter for the performance of the duties of and animal control officer as specified in section 3947 unless an employee of that shelter is the appointed animal control officer for that municipality and the duties of an animal control officer are performed by the person so appointed.

Animal Control Officer Phone Numbers During Business Hours:

Work: _____

Cell:

Email: _____

After business hours:

Emergency Contact / Phone: _______(For AW/Maine State Police Only)

What number should the public use?

(The contact information for the public to reach the ACO will be published on our website.)

ANIMAL WELFARE PROGRAM 90 BLOSSOM LANE, DEERING BUILDING



PHONE: (207) 287-3846 FAX: (207) 624-5028 WWW.MAINE.GOV/DACF

Other Municipal Information:

Do you have a full-time or part-time Police Dept? _		
Do they handle any dog complaints in absence of A	CO:	YES or NO
Contact Person:	Phone Number:	
Is there a maximum number of dogs per municipal of	charter / ordinance which limits ownership:	YES or NO
If YES, how many: How many kenne	ls does your municipality have:	
Do you have known / licensed dog breeders in your municipality?		
Animal Control Officer Contact Info	ormation	
Name:	Date Certified:	

If the ACO is unavailable or has an extended emergency, what is the municipal plan for coverage:

 Mailing Address:

 Continuing Education Date:

* 7 § 3947. Animal control officers

Animal control officers must be certified in accordance with section 3906-B, subsection 4. Upon initial appointment, an animal control officer must complete basic training and be certified by the commissioner within 6 months of appointment.] An animal control officer must attend advanced training programs as described under section 3906-B, subsection 4 to maintain certification. An animal control officer must have a minimum of 8 hours of training each year.

Do you have any suggestions or comments for Animal Welfare?

Name of person	completing	this form:
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Phone: