



ANIMAL CONTROL BOARD

I hereby notify you that the following items of business have been filed with this office and can be acted upon at the meeting of the Animal Control Board **Thursday, December 18, 2025** at 10:00 AM.

City Clerk

Approval Of Minutes

1. October 16, 2025 Minutes

Dog Hearing

2. A Dangerous Dog Hearing for a Dog Named Phoebe Owned by Mary Luz Ramos at 58 Fremont St
3. A Nuisance Dog Hearing For a Dog named Callie and Bella at 58 Cherrelyn St Owned by Tyran Daniels who lives at 59 Stebbins Street.
4. A Dangerous Dog Hearing for Two Dogs Named Orion and Ace Owned by Shavon Diaz at 42 Cornell St
5. A Dangerous Dog Hearing for a Dog named White Boy/Prince Owned by Edwin Gonzales at 40 Adams St

Non-Compliance

6. A Non-Compliance Nuisance Dog Hearing for a Dog Named Emery Owned by Amanda-Lee Camacho at 1859 Roosevelt Ave

Animal Control Hearing

Minutes

Call to Order

10:00 AM Meeting called to order on Thursday, **October 16, 2025** at City Hall -- Room 205, 36 Court Street, Springfield, MA.

Attendee Name	Title	Status	Arrived
Melvin A. Edwards	Ward 3 Councilor	Present	
Keith Fleming	Police	Present	
Camile Nelson Campbell	Assistant City Clerk	Present	
Megan Landry	Board Member	Present	
Veronica Johns	Board Member	Absent	

Approval of Minutes

1. September 25, 2025 Minutes

Read.

Board Member Edwards made a motion to accept the minutes the motion was seconded by Board Member Landry.

Roll call votes on the motion

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	yes

Motion passed by roll call votes.

Minutes approved.

Dog Hearing

2. **A Dangerous Dog Hearing for a dog named Remi at 10 Sanderson St Owned by Gipsy Espinal who lives at 265 Dwight St Extension 4L.**

Read.

Renee Robichaud, Animal Control Officer for Thomas J. O'Connor (TJO) and Adoption Center read their reports.

Complainant

Mr. Jose Candelaria appeared and said his statement is the same as before.

Respondent

Gipsy Espinal did not appear.

Rebuttal

None

Board Member Nelson Campbell made a motion to deem the dog named Remi as dangerous the motion was seconded by Board Member Edwards.

Roll call votes on the motion

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	Yes

Motion passed by roll call votes.

After review of the hearing testimonies and the Thomas J. O'Connor Animal Control and Adoption Center reports, the Committee has imposed the following conditions on Remi:

(1) That, owner of the dog failed to appear at a hearing in front of the Advisory and Hearing Committee; (2) Remi, the grey pit bull was previously declared a dangerous dog at the June 26, 2025 Dangerous Dog Hearing; and (3) Remi shall be impounded and euthanized, in accordance with c 110§10, B,7 of the Code.

Roll call votes on the Conditions

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	Yes

Non-Compliance

3. **A Non-Compliance Nuisance Dog Hearing for a dog named Mia at 64 California Ave Owned by Peter Gallucci.**

Read.

Renee Robichaud, Animal Control Officer for Thomas J. O'Connor (TJO) and Adoption Center read their reports.

Complainant

Thomas J. O'Connor.

Respondent

Mr. Gallucci said evidently, he is not taking a good enough care for the City of Springfield appliances.

Rebuttal

None

Board Member Edwards made a motion to deem the dog named Remi as dangerous the motion was seconded by Board Member Landry.

Roll call votes on the motion

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	Yes

Motion passed by roll call votes.

After review of the previous order hearing testimonies and the Thomas J. O'Connor Animal Control and Adoption Center reports, the Committee has imposed the following conditions on Mia:

1. That the dog be humanely restrained. As defined in Chapter 110, Section 10-B-1 of the Code of the City of Springfield Ordinance.
2. That the dog be tethered when in the yard. As defined in Chapter 110, Section 10-B-9 of the Code of the City of Springfield Ordinance.

On October 16, 2025, condition three (3) was added as an additional:

3. That if the dog is caught off the property Thomas J. O'Connor (TJO) will impound the dog, the owner will pay one hundred dollars (100.00) per day for boarding until the next hearing date, in accordance with c 110§§ 9 of the Code.

Roll call votes on the conditions

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	yes

Condition passed by roll call votes

4. A Non-Compliance Nuisance Dog Hearing for a dog named Emery at 1859 Roosevelt Ave Owned by Amanda-Lee Camacho.

Read.

Renee Robichaud, Animal Control Officer for Thomas J. O'Connor (TJO) and Adoption Center read their reports.

Complainant

Thomas J. O'Connor.

Respondent

None

Rebuttal

None

Board Member Edwards made a motion to deem the dogs named Starla and Sapphire as nuisance dogs the motion was seconded by Board Member Fleming.

Roll call votes on the motion

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	Yes

Motion passed by roll call votes.

After review of the hearing testimonies and the Thomas J. O'Connor Animal Control and Adoption Center reports, the Committee has imposed the following conditions on:

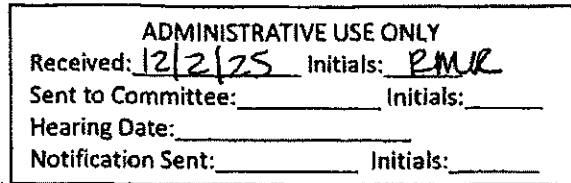
After review of the hearing testimonies and the Thomas J. O'Connor Animal Control and Adoption Center reports, the Committee has imposed the following conditions:

1. That all four (4) dogs in your household be licensed and vaccinated, in accordance with c. 110 § 2 of the Code;
2. That all four (4) dogs in your household be spayed or neutered, in accordance with c. 110 § 3(B) of the Code; and
3. That **Starla** and **Sapphire** be humanely restrained when outdoors, in accordance with c. 110 §§ 5(A) and 10(B)(1) of the Code.

Roll call votes on the conditions

Board member Edwards	Yes
Board member Fleming	Yes
Board member Johns	Absent
Board member Landry	Yes
Board member Nelson Campbell	yes

Condition passed by roll call votes



NEXT PAGE>>>>>>>>>

Brief Description of Incident:

ATTACHMENT: YES / NO

I walk my dogs every morning, and the dog was in its yard with the owner and daughter. We were just talking friendly and I asked if it was a boy or girl. The dog is always high strung and runs back & forth as if it had just been freed from a cage. I was a few inches from the fence. My left arm is injured (surgery in 2 weeks) and I hold it up closer to my chest to alleviate pain. All of a sudden the dog did 2 jumps, the 1st one startled me, the 2nd immediately lunged forward and got my wrist and pulled my arm, I thought it was going to pull it off! I screamed, they grabbed the dog and ran inside with it. This dog is able to jump the fence, she is almost as tall as I am. I received X-ray, stitches, tetanus shot & antibiotics.

Do you know the name or address of the owner of the dog(s)? YES / ☒ NO

Name: _____

Street Address: _____

Phone: _____

Phone: _____

Email: _____

DOG INFORMATION

Name: _____

Sex: Female

Breed: _____

Large Pitbull

Primary Color: _____

White

Secondary Color: black spots on ears

Name: _____

Sex: _____

Breed: _____

Primary Color: _____

Secondary Color: _____

* This has left me Fearful and a bit traumatized. Considering the dog has gotten out of gate in the Past, I'm too afraid to be out front now with that dog right near by, it will always be a danger

Date of Report: 11/12/2025		ANIMAL BITE REPORT Rabies Control Investigation Thomas J. O'Connor Animal Control				1. Bite Number: B25-004285	
I. ANIMAL/PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) KENNEDY, JAQUELINE		3. ID # P059638	4. Sex <i>female</i>	5. Age DOB	
	EXPOSURE	7. Address (No. & Street) (City) (State) (Zip) 48 FREMONT ST SPRINGFIELD, MA 01105					
		8. Name of Parent or Guardian (if victim is a minor)			9. Address (if different)		
		10. Source of Information <i>Daniel Macdon (husb) Teresa Ramos dog + witness</i>			Victim Telephone - Other		
		11. Place of attack 58 FREMONT ST			12. Time and Date of attack November 11, 2025 10:00 am		
	13. Circumstances of attack: PROVOKED						
	14. Location and description of wound(s): ARM, UNK						
	TREATMENT	15. Was wound treated? <i>unknown</i> ☐ No ☐ Yes Date:		16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. Telephone <i>Unknown</i>			
		17. Details of wound treatment ☐ Washed ☐ Sutured <i>unk</i>		18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?			
		19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? <i>unk</i>		Telephone:			
MISC.	Limited info due to victim's husband relaying incident, and not a witness to it. Owner of dog reports Kennedy had one dog leashed and one free roaming. Kennedy was bitten when she put her arm over the gate in to Phoebe's space. See A25-087152 notes.						
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) RAMOS, MARY LUZ			21. ID # P059637	Telephone: (413) 389-0022	
	QUARANTINE	22. Address (No. & Street) (City) (State) (Zip) 58 FREMONT ST SPRINGFIELD, MA 01105			23. Type of animal SPAYED FEMALE, DOG ID # A069290 ☒ Owned ☐ Stray ☐ Wild Est. Age: 3 YEARS		
		24. Description: (Breed, color, etc.) PHOEBE WHITE / BLACK PIT BULL			25. License <i>unlicensed</i> Tag: Year: Expires:		
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☐ Yes ☒ No		
		28. Vaccinated against rabies? <i>To provide proof</i> UNKNOWN Vet:			Vaccination Date Rabies Tag Number ☐ 1 Year Vaccine ☐ 3 Year Vaccine		
		29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 11/11/2025 To Date: 11/21/2025			30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☐ No		
				31. Date sent to Animal Inspector/Board of Health <i>Emailed 11/13/25 MM</i>			
	III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:				
LABORATORY		32. Veterinarian ☐ Did see animal ☐ Did not see animal 33. Head examination is ☐ Requested ☐ Not Warranted					
		34. Remarks:					
		35. Head sent to Lab: DATE BY TELEPHONE					
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY					
		37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:					
		38. ☐ Case Closed: Date: By:					
		39. Officer Completing Form: <i>Sanborn</i> Telephone: <i>781-1484</i>					

<Regional Animal Control>

(1) IN: 2025-11-11 03:05PM ERV

Edit who has Msg :JULES HAS MSG

For

From:DANIEL MARTIN, JAQUELINE KENNEDY

If PD,Is Cruiser Standing By?

Tel#:(413)333-8506

Message:WIFE ATTACKED BY NEIGHBORS DOG - 48
FREEMONT ST SPFLD - HAPPENED AT 58 FREEMONT,
RIPPED HER HAND OPEN - PITBULL

Caller ID:(413) 333-8506

***** ACTIVITIES *****

1) 11-11 03:10PM ERV Dial Sanborn, Jules

CELL 4134637674 JULES HAS MSG

2) 11-11 03:42PM BSB Fax

***** END OF MESSAGE FOR <Regional Animal Control> *****



Activity Information Report For Activity A25-087152

Activity Information

Sequence: 1

Results

Times

Officer: P030355 - JULIE SANBORN
Type: INV
Subtype: BITE
Address:
58 FREMONT ST
SPRINGFIELD, MA 01105

2 UTM
2 NOTIC

Call Date: 11/11/2025 15:33
New Date: 11/11/2025 15:33
Dispatch Date:
Working Date: 11/11/2025 15:46
Complete Date: 11/11/2025 15:58

Comment: Dog vs human

Caller Information

P000203

Name: SPRINGFIELD POLICE
Address:
130 PEARL ST APT 4TH
SPRINGFIELD, MA 01105
Jurisdiction: SPRINGFIELD

Phone Numbers:
(413) 787-6302
(413) 272-1434

Email: n/a

Owner Information

P059637

Name: MARY LUZ RAMOS
Address:
58 FREMONT ST
SPRINGFIELD, MA 01105
Jurisdiction: SPRINGFIELD

Phone Numbers:
(413) 389-0022

Activity Animal

A069290

Name: PHOEBE
Type: DOG
Gender: SPAYED FEMALE

Age: 3 YEARS
Color: WHITE AND BLACK
Breed: PIT BULL

Bite Reports

B25-004285

Incident Location: 58 FREMONT ST
Jurisdiction: SPRINGFIELD

Synopsis: Limited info due to victim's husband relaying incident, and not a witness to it.
Owner of dog reports Kennedy had one dog leashed and one free roaming. Kennedy was bitten when she put her arm over the gate in to Phoebe's space. See A25-087152 notes.

Owner:

P059637

Name: MARY LUZ RAMOS
Address:
58 FREMONT ST
SPRINGFIELD, MA 01105
Jurisdiction: SPRINGFIELD

Phone Numbers:
(413) 389-0022



Activity Information Report For Activity A25-087152

Animal:**A069290**

Name: PHOEBE
Type: DOG
Gender: SPAYED FEMALE
Prior Bites: NO

Age: 3 YEARS
Color: WHITE AND BLACK
Breed: PIT BULL

Victim:**P059638**

Name: JAQUELINE KENNEDY
Address:
48 FREMONT ST
SPRINGFIELD, MA 01105

Phone Numbers:
(413) 333-8506

Jurisdiction: SPRINGFIELD

Relation: NEIGHBOR
Location: ARM
Severity: UNK
Circumstance: PROVOKED

Treatment:

By: UNK
Description: UNK IF TREATED

Date:**Witness:****P059639**

Name: JESENIA RAMOS
Address:
58 FREMONT ST
SPRINGFIELD, MA 01105

Phone Numbers:
(413) 389-0022

Jurisdiction: SPRINGFIELD**Quarantine:**

Begin Date: 11-Nov-25
By: OWNER
Location: HOME

P059637

Quarantine By
Name: MARY LUZ RAMOS
Address:
58 FREMONT ST
SPRINGFIELD, MA 01105

Phone Numbers:
(413) 389-0022

Jurisdiction: SPRINGFIELD

End Date: 11/21/25
Notify Date: 11/13/25

Abated By:
Notified By: EMAIL



Activity Information Report For Activity A25-087152

Activity Memos

Memo No: M25-026302 Date: 11/11/25 Type: INVESTIGAT

SPD called about a bite incident that allegedly occurred at 58 Fremont St. I was given a name of Charles Cochran 413-537-1692. I tried several times to call Charles but it went to VM then said mailbox was full.

A short time later, Daniel Martin called to report his wife, Jacqueline Kennedy was bitten by the neighbor's dog. He reported she was bitten on her arm, but did not indicate left or right.

He reported his wife was walking their dog and stopped at #58 to speak with the occupants of that home. He alleges the dog, a white pitbull type was in its own fenced yard and never left the yard. Martin further alleges the dog grabbed his wife's arm and attempted to pull her over the fence.

He then escalated and yelled, I want that dog removed from the yard immediately. I advised that dogs are property and we as animal control cannot just go on a property to remove a dog. I advised the dog was in its own yard. He became angered by my lack not agreeing with him. He then stated so it I hit it in the head with a baseball bat, that is acceptable. Before I could say, only if in a fight for your life, he just said nevermind, if you are refusing to address this, I'll handle it my own way.

I visited 58 Fremont to make contact with the owner of the dog. I was unable to make contact. I did take photos of the fence where allegedly Ms. Kennedy was grabbed. It is a gate about 4 feet tall. There is about 6 feet of sidewalk from the gate that the dog would never be able to reach Kennedy unless she was within reach of his mouth.

A short time later, Mary Luz Ramos called back in regards to the Notice on her door at #58. I advised why I was there. She knew of the incident. She stated, I am going to let you speak with my daughter. She was outside with my granddaughter and both witnessed the entire event. A female got on the phone and identified herself as Jesenia. She alleged she and her daughter were outside with Phoebe, their 3yo SF pitt type. She involved her daughter in the conversation since she allegedly spoke with Kennedy before the incident occurred. Both allege that Kennedy was walking on the sidewalk near their fence.

Allegedly she was walking 2 toy breed dogs, one was leashed and one was free roaming. They report that this incited Phoebe and their other dog, Bailey (chi type) to start barking. Phoebe was reported to be jumping up and down on her hind legs. They report the unleashed dog was right against their fence, further causing Phoebe to become amped up. They then allege that Kennedy came closer and engaged in a conversation with them, allegedly asking about their dogs. At that point, they witnessed Kennedy put her arm over the gate for unknown reasons and at this point Phoebe allegedly grabbed her arm. They both reported, that Kennedy stated, Oh I gotta go and she walked off. Phoebe is owned by Jesenia's brother, Rex Ramos, who owns the home. There is NO bite history with animal control.

The neighbor across from #58 has an outdoor camera which I will attempt to view footage of the event.

I then went to the victim's house at #48 Fremont to attempt contact. I knocked, but nobody answered. I left a Notice on the door as well as a DD/ND request form in an envelope.

The bite investigation is limited because Daniel speaks on behalf of his wife and was not a witness to the alleged incident. I received Daniel's version, as reported by his wife and his uncooperative behavior of demanding I do my job and eliminate the dog from HIS neighborhood.

In Tracker, it was determined that the 2 dogs at #58 and the 2 dogs from #48 are not licensed..... Officer Sanborn

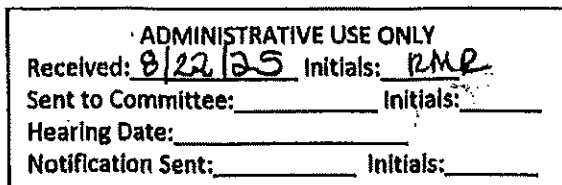


Activity Information Report For Activity A25-087152

Photos:

Additional Activity Documentation May Be Associated with This Record. Use ChamCam to View and Print





NEXT PAGE>>>>>>>>>>



Citation-Violation Detail

Violation Number V25-002649

Violation Date: 8/22/2025 1:40PM

Violation Type: CITATION

Form No: 227695

DEFENDANT TYRAN T DANIELS 59 STEBBINS ST SPRINGFIELD, MA 01109 (413) 466-2969	P058754	COMPLAINANT
--	----------------	--------------------

Issued By: P052479 - OFFICER LAWSON

Activity: A25-086287-1

LOCATION OF VIOLATION CHERRELYN ST	JURISDICTION SPRINGFIELD	APPROVED
SYNOPSIS 2 known dogs on video being walked off-leash. 2x LL & 2x S/N viol.		

OFFENSES

LL-1ST-507 x1	A068081 - CALLIE TAN/WHITE F AM PIT BULL TER	\$50.00
LL-1ST-507 x1	A068082 - BELLA BLUE CREAM/TAN F AM PIT BULL TER	\$50.00
S/N VIOL-510 x1	A068081 - CALLIE TAN/WHITE F AM PIT BULL TER	\$100.00
S/N VIOL-510 x1	A068082 - BELLA BLUE CREAM/TAN F AM PIT BULL TER	\$100.00
		\$300.00



Activity Card
A25-085107-1

A25-085107-1 **STRAY/AGGRS** **Priority Level: 2** **Total Animals: 2** **Animal Type: DOG**

Activity Address: 58 CHERRELYN ST

Activity Comment: Rprt of 2 aggressive pit bull type dogs that are allegedly always roaming loose and has allegedly attacked in the past. Upon arrival w/ SPD, no dogs loose. Heard dogs inside. No one home. UTMC, LN

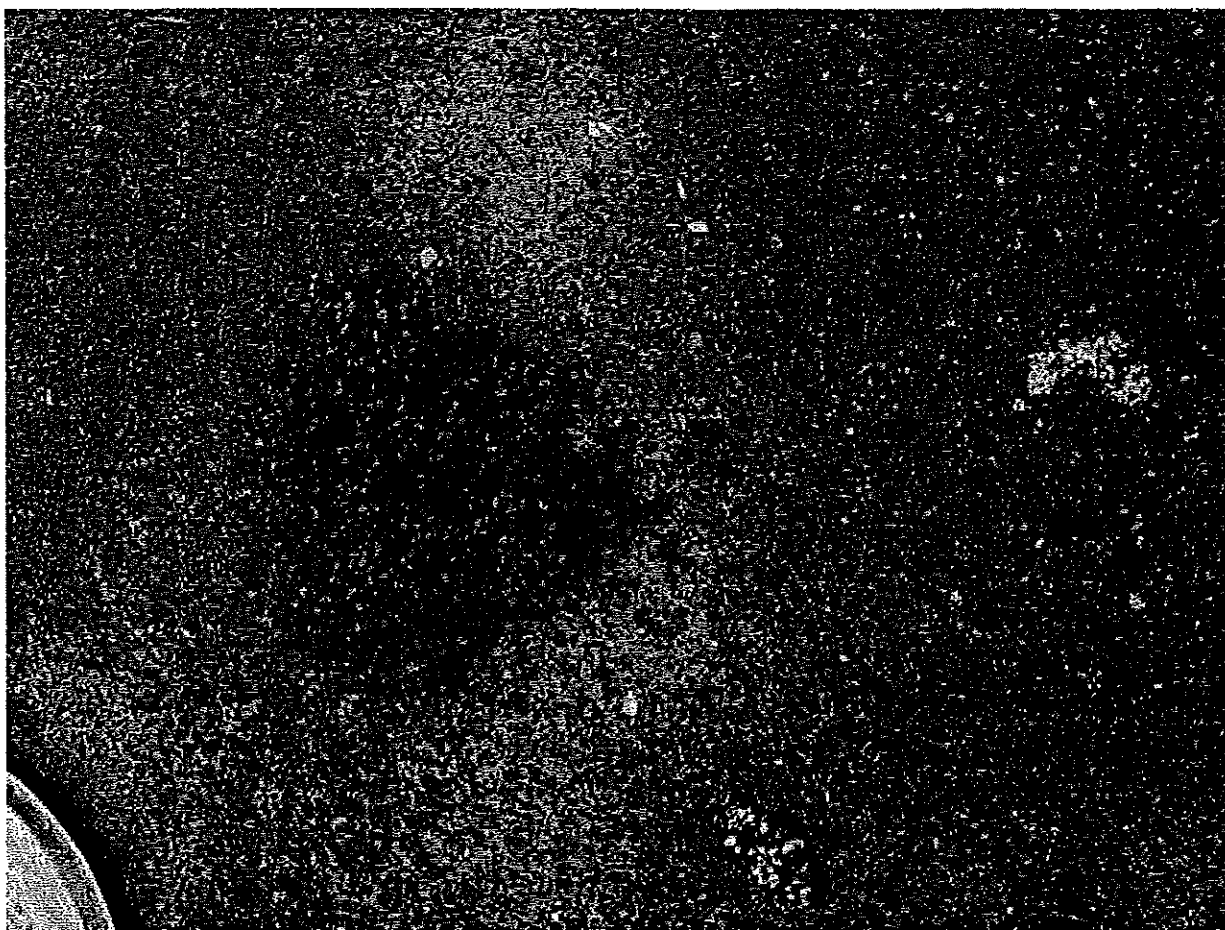
Caller Information:

P000203 SPRINGFIELD POLICE
SPRINGFIELD, MA 01105
130 PEARL ST 4TH
(413) 787-6302

Owner Information:

Animal Information:

Officer: P999921	LAZU	Clerk: 118454	Results:
Call Date:	06/01/25 05:15 PM		1 UTMC
New Date:	06/01/25 05:15 PM		1 NOTIC
Dispatch Date:			
Working Date:	06/01/25 05:32 PM		
Complete Date:	06/01/25 05:42 PM		



WELFARE STATE

CONTRACT UNDER FOR

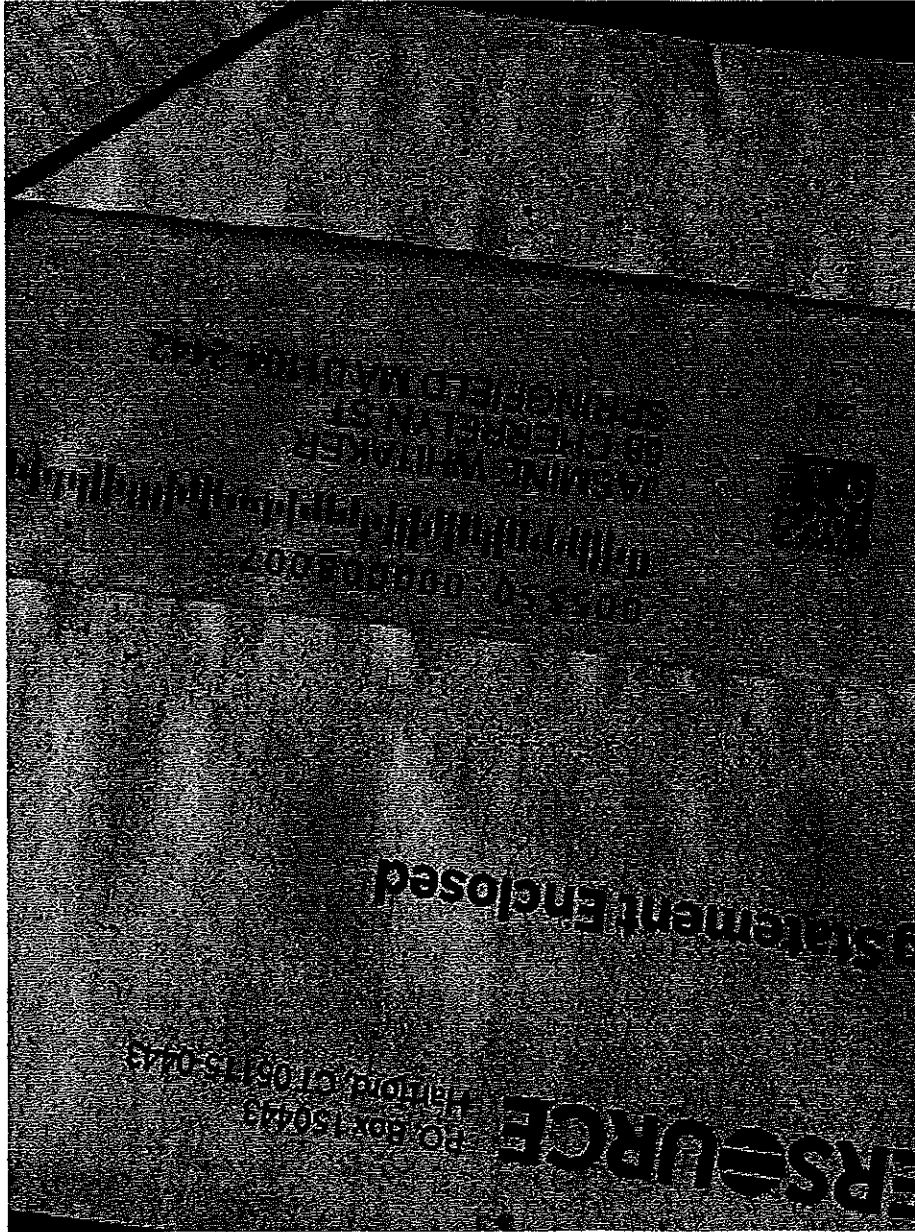
STRENGTH

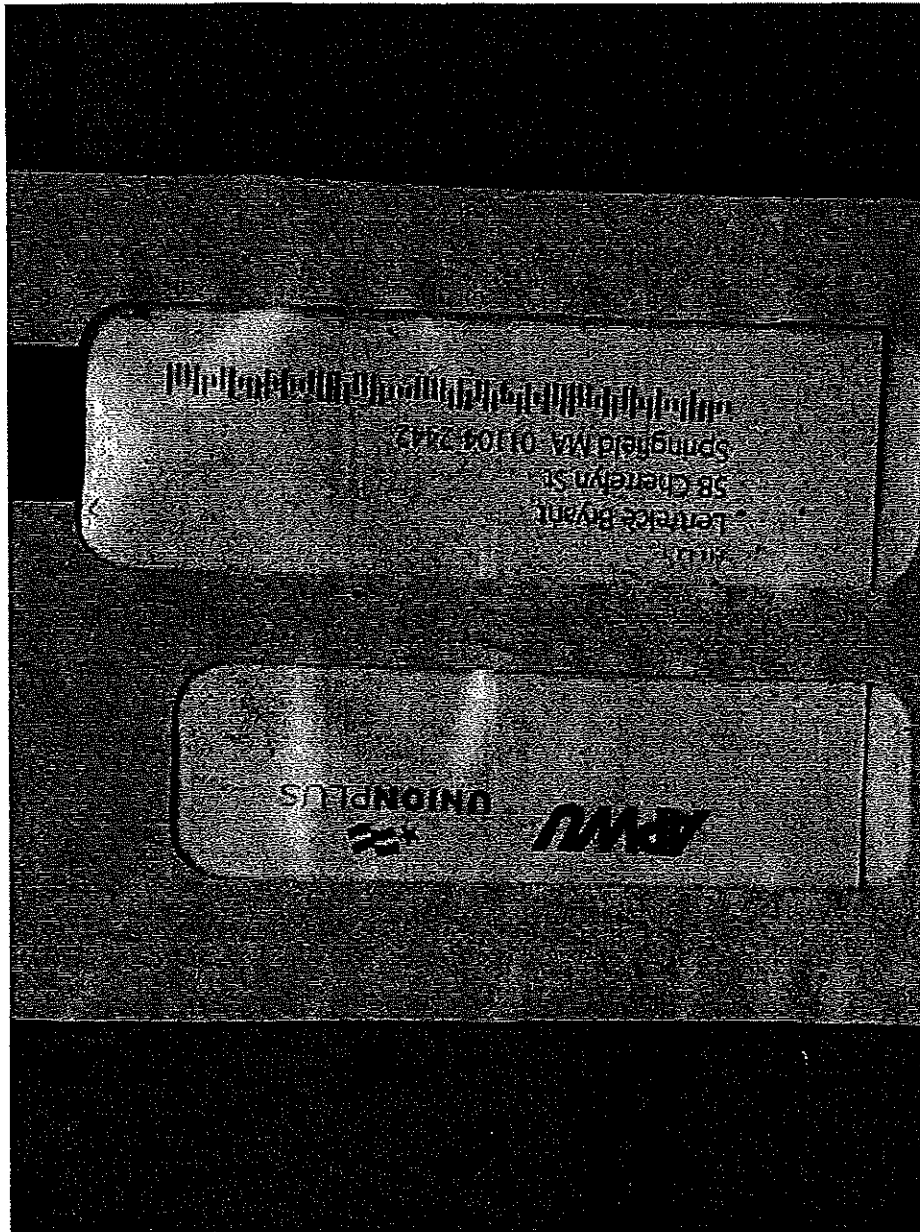
[illegible]

1. The first step in the process is to identify the problem. This involves gathering information about the situation and the people involved.

1. *Chlorophyll a* (Chl *a*) is the primary photosynthetic pigment in most plants and algae. It is a green pigment that absorbs light energy in the blue and red regions of the visible spectrum.

[illegible]





LENNER, BYRON
58 CHESTER ST.
SPRINGFIELD, MA 01104-2442

BMW
UNIONPLUS





Activity Card
A25-085643-1

A25-085643-1 **INV/BITE** **Priority Level: 1** **Total Animals: 2** **Animal Type: DOG**

Activity Address: 58 CHERRELYN ST

Activity Comment: 2 loose bully breed. Tan one (Bella) is the one who bit the neighbor. Per victim, it was a tooth nick and not a puncture. Neighbor reports owner lets them loose all day and brings them inside at night.....Sanborn
See notes

Caller Information:

P058685 MICHAEL TLUSCZ
SPRINGFIELD, MA 01104
58 CHERRELYN ST
(413) 310-4668

Owner Information:

P058754 TYRAN DANIELS
SPRINGFIELD, MA 01109
59 STEBBINS ST
(413) 466-2969

Animal Information:

A068081 Callie - 1Y 8M Female Tan/White Am Pit Bull Ter

Officer: P030355	SANBORN	Clerk: 111659	Results:
Call Date:	07/07/25 08:42 AM		1 IMPND
New Date:	07/07/25 08:42 AM		1 HQUAR
Dispatch Date:			
Working Date:	07/07/25 08:59 AM		
Complete Date:	07/07/25 09:44 AM		

Memos:

M25-025785 07/07/2025



Activity Card

A25-085643-1

SPD call via neighbor who was bitten by the neighbor's pitbull type dog. Spoke with victim and he reported the neighbor at #58 allegedly lets the 2 dogs out during the day. The victim only sustained a tooth nic from Bella and did not require AMR transport.

Upon arrival, I was met with 2 aggressive bully breed dogs running up and down the driveway and all around the yard. It is not fenced, I did notice a large pile of dry kibble in the backyard, but did not see any water available for the dogs. Both dogs were panting excessively. I had the pole, trying to capture, but dogs were circling me and very aggressive. I offered water to allow them to cool off a little bit.

I looked inside the window and the apt is empty. I left a notice on the front door. I did hear another dog barking inside. I was advised by the next door neighbor that the third dog is named "Forty" and is a small breed dog.

Was finally able to capture the tan one first. She had collapsed in the driveway. I was able to get her inside the vehicle and turned the AC on full force. She was lateral at first but then started to become more alert and sitting sternal. It took another 10 minutes to capture the blue cream/tan (Caille). She alligator rolled on the pole and then started having some mild seizure activity. Her body was hot to the touch. I was able to get her in to the vehicle and I rushed them both back to the shelter. They were carried in by Renee Robichaud and myself. Bella was able to ambulate better than Caille. Caille was unable to use her hind limbs upon arrival back to shelter. ?post ictal. I advised she was clearly able to run around the yard without deficit.....Sanborn

I did leave a message on 413-505-4395. It was a permit hanging on the front porch and listed 59 Stebbins LLC as the owner of the property and this was the #.....Sanborn



Activity Card
A25-085651-1

A25-085651-1

YARD CHK

Priority Level: 4

Total Animals: 1

Animal Type: DOG

Activity Address: 58 CHERRELYN ST

Activity Comment: Went to see if Notice gone. It was not but I did not hear the dog barking inside either on this visit.

Owner Information:

Animal Information:

Officer: P030355

SANBORN

Clerk: 111659

Results:

Call Date: 07/07/25 02:44 PM

1 UTM

New Date: 07/07/25 02:44 PM

Dispatch Date:

Working Date: 07/07/25 03:03 PM

Complete Date: 07/07/25 03:09 PM



Activity Card
A25-085701-1

A25-085701-1

XTRA SERVE/YARD CHCK Priority Level: 4

Total Animals: 1

Animal Type: DOG

Activity Address: 58 CHERRELYN ST

Activity Comment: Went to check to make sure the third dog was gone as well as the Notice. Notice was gone and I did not hear a dog barking. Matter resolved.....

Owner Information:

Animal Information:

Officer: P030355

SANBORN

Clerk: 111659

Results:

Call Date: 07/11/25 01:46 PM

1 COMP

New Date: 07/11/25 01:46 PM

1 RSVLD

Dispatch Date:

Working Date: 07/11/25 01:52 PM

Complete Date: 07/11/25 01:54 PM



Activity Card
A25-086287-1

A25-086287-1 **STRAY/AGGRS** **Priority Level: 2** **Total Animals: 2** **Animal Type: DOG**

Activity Address: 58 CHERRELYN ST

Activity Comment: RP has video of 2 bully dogs who reside at 58 Cherrelyn being walked off leash by her property. She states dogs tried to get over her fence to get to her. States dogs are regularly loose. UTMC w/ O. Citation issued - DDH form filled out

Caller Information:

P000203 SPRINGFIELD POLICE
SPRINGFIELD, MA 01105
130 PEARL ST 4TH
(413) 787-6302

Owner Information:

P058754 TYRAN DANIELS
SPRINGFIELD, MA 01109
59 STEBBINS ST
(413) 466-2969

Animal Information:

A068081 Callie - 1Y 8M Female Tan/White Am Pit Bull Ter

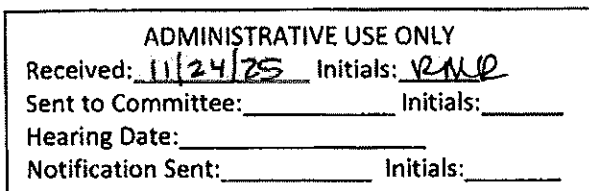
Officer: P052479 **LAWSON** **Clerk:** 117246

Call Date: 08/22/25 12:10 PM
New Date: 08/22/25 12:10 PM
Dispatch Date:
Working Date: 08/22/25 12:27 PM
Complete Date: 08/22/25 12:51 PM

Results:

1 MC
1 UTMC
1 NOTIC
1 CITE

Date of Report: 07/07/2025		ANIMAL BITE REPORT Rabies Control Investigation Thomas J. O'Connor Animal Control				1. Bite Number: B25-004153	
I. VICTIM/PERSON BITTEN	IDENTIFICATION		2. Name (Last, First) TLUSZCZ, MICHAEL	3. ID # P058686	4. Sex <u>male</u>	5. Age DOB 18	6. Telephone (413) 310-4668
	7. Address (No. & Street) (City) (State) (Zip) 58 CHERRELYN ST SPRINGFIELD, MA 01104						
	8. Name of Parent or Guardian (if victim is a minor)				9. Address (if different)		
	10. Source of Information <u>Michael</u>				Victim Telephone - Other		
	EXPOSURE		11. Place of attack 54 CHERRYLYN ST				
	12. Time and Date of attack July 7, 2025 12:00 am					13. Circumstances of attack: PROVOKED	
	14. Location and description of wound(s): L HAND, D2						
	TREATMENT		15. Was wound treated? ☐ No ☒ Yes Date: <u>7/7/25</u>				
	MISC.		16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. <u>AMR</u> Telephone				
	17. Details of wound treatment ☐ Washed ☐ Sutured <u>unk</u>						
18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom? <u>unk</u>							
19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? Telephone:							
Michael was sitting on his porch and was approached by both dogs. He reached out and Bella snapped causing a small nic to his left hand. No puncture.							
II. ANIMAL/OWNER	IDENTIFICATION		20. Animal Owner (custodian) PERSON, UNKNOWN		21. ID # P000000	Telephone:	
	22. Address (No. & Street) (City) (State) (Zip)						
	23. Type of animal FEMALE, DOG		ID # A088081	☐ Owned ☒ Stray ☐ Wild		Est. Age: 5 YEARS	
	24. Description: (Breed, color, etc.) TAN / WHITE AMPIT BULLTER			25. License Tag: Year: Expires:			
	26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal		27. Prior Bites? ☒ Yes ☒ No				
	28. Vaccinated against rabies? UNK Vet:		Vaccination Date		Rabies Tag Number		☐ 1 Year Vaccine ☐ 3 Year Vaccine
	QUARANTINE		29. ☐ Unable to locate animal ☒ Confined at TJO ☒ Animal Confined - TJO From Date: 07/07/2025 To Date: 07/17/2025				
	30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☐ No					31. Date sent to Animal Inspector/Board of Health <u>7/15/25 Emailed MM</u>	
	32. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:						
	32. Veterinarian ☐ Did see animal ☐ Did not see animal		33. Head examination is ☐ Requested ☐ Not Warranted				
34. Remarks:							
III. DISPOSITION OF ANIMAL	REVIEW						
	LABORATORY		35. Head sent to Lab: DATE BY TELEPHONE				
	36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
	37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:						
	38. ☒ Case Closed: Date: <u>7/23/25</u> By: <u>SANBORN</u>						
39. Officer Completing Form: <u>SANBORN</u> Telephone: <u>781-1484</u>							



NEXT PAGE>>>>>>>>>>

Brief Description of Incident:

ATTACHMENT: YES

☒ NO

We heard noise and banging on the side of our home. We looked out the window and saw two dogs attacking a cat. We banged on the window and then went outside to help the cat, my son chased the two dogs away and then followed them up the street to learn their location. I (Mary Taylor) called animal control who came to our home within 15 min. The cat had expired and they took him away.

RESPONDENT INFORMATION

Do you know the name or address of the owner of the dog(s)? YES

☒ NO

Name: Shavon Diaz

Street Address: 42 Cornell St. Springfield MA 01109

Phone: 413-222-1438 Phone: 330-5974 / 221-9497

Email: ShavonKK@yahoo.com

DOG INFORMATION

Name: Orion A058598 Sex: M

Breed: Husky

Primary Color: White Secondary Color: _____

Name: Ace A058599 Sex: M

Breed: Husky

Primary Color: Black Secondary Color: White

Date of Report: 11/18/2025

ANIMAL BITE REPORT

Rabies Control Investigation

1. Bite Number:
B25-004291

Thomas J. O'Connor Animal Control

I. ANIMAL PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) Willow	3. ID # A069333	4. Sex M	5. Age 6	DOB	6. Telephone 413-306-8529	
	EXPOSURE	7. Address (No. & Street) (City) (State) (Zip)						
		8. Name of Parent or Guardian (if victim is a minor) HUDSON, MSHAE (P050635) (NONE)			9. Address (if different) 12 MCKNIGHT ST, SPRINGFIELD, MA 01109			
		10. Source of Information Witness - P0591678			Victim Telephone - Other			
TREATMENT	EXPOSURE	11. Place of attack 36 DARTMOUTH ST			12. Time and Date of attack November 17, 2025 12:00 am			
		13. Circumstances of attack:						
	TREATMENT	14. Location and description of wound(s): ABDOMEN, LVL 6						
		15. Was wound treated? ☒ No ☐ Yes Date:			16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. Telephone			
17. Details of wound treatment ☐ Washed ☐ Sutured			18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?					
MISC.	19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? Telephone:							
	Orion & Ace were loose when they came across Willow on Dartmouth St. The dogs attacked Willow resulting in his death.							
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) DIAZ, SHAVON			21. ID # P054656		Telephone: (413) 222-1438	
		22. Address (No. & Street) (City) (State) (Zip) 42 CORNELL ST SPRINGFIELD, MA 01109						
		23. Type of animal MALE, DOG		ID # A058598	☒ Owned ☐ Stray ☐ Wild		Est. Age: 5 YEARS	
		24. Description: (Breed, color, etc.) WHITE SIBERIAN HUSKY			25. License Tag: 50022 Year: 2025 Expires: 3/31/26			
	26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☒ Yes ☐ No				
	28. Vaccinated against rabies? NO Vet: TJO Exp 10/30/25			Vaccination Date 10/30/24		Rabies Tag Number 24-0716		
	29. ☐ Unable to locate animal ☐ Confined at TJO ☐ Animal Confined - HQUAR			From Date: 11/17/2025 To Date: 11/17/2025				
	QUARANTINE	30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☒ No			31. Date sent to Animal Inspector/Board of Health			
III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☒ Injury ☐ Euthanasia Date: 11/17/25						
		32. Veterinarian ☐ Did see animal ☐ Did not see animal			33. Head examination is ☐ Requested ☐ Not Warranted			
	34. Remarks:							
	LABORATORY	35. Head sent to Lab: DATE BY TELEPHONE						
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:								
38. ☐ Case Closed: Date: By:								
39. Officer Completing Form: LAWSON Telephone: 413 781 1484								

Date of Report: 11/18/2025

ANIMAL BITE REPORT

Rabies Control Investigation

Thomas J. O'Connor Animal Control

 1. Bite Number:
B25-004292

I. ANIMAL PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) Willow	3. ID # A058599	4. Sex M	5. Age 6	DOB	6. Telephone 413-306-8529	
		7. Address (No. & Street) (City) (State) (Zip)						
	EXPOSURE	8. Name of Parent or Guardian (if victim is a minor) HUDSON, MSHAE (P050635) (NONE)			9. Address (if different) 12 MCKNIGHT ST, SPRINGFIELD, MA 01109			
		10. Source of Information Witness - P059678			Victim Telephone - Other			
		11. Place of attack 36 DARTMOUTH ST			12. Time and Date of attack November 17, 2025 12:00 am			
TREATMENT	13. Circumstances of attack:							
	14. Location and description of wound(s): ABDOMEN, LVL 6							
	15. Was wound treated? ☒ No ☐ Yes Date:			16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. Telephone				
	17. Details of wound treatment ☐ Washed ☐ Sutured			18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?				
MISC.	19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? Telephone:							
	Orion & Ace were loose when they came across Willow on Dartmouth St. The dogs attacked Willow resulting in his death.							
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) DIAZ, SHAVON			21. ID # P054656		Telephone: (413) 222-1438	
		22. Address (No. & Street) 42 CORNELL ST			(City) (State) (Zip) SPRINGFIELD, MA 01109			
		23. Type of animal MALE, DOG		ID # A058599	☒ Owned ☐ Stray ☐ Wild		Est. Age: 6 YEARS	
		24. Description: (Breed, color, etc.) BLACK / WHITE SIBERIAN HUSKY			25. License Tag: 5021 Year: 2025 Expires: 3/31/26			
	QUARANTINE	26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☒ Yes ☒ No			
		28. Vaccinated against rabies? YES Vet: Blairfield Pet Hospital			Vaccination Date 10/10/24		Rabies Tag Number C854530	
		29. ☐ Unable to locate animal ☐ Confined at TJO ☐ Animal Confined - HQUAR			From Date: 11/17/2025		To Date: 11/17/2025	
		30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☒ No			31. Date sent to Animal Inspector/Board of Health			
III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☒ Injury ☐ Euthanasia Date: 11/17/25						
		32. Veterinarian ☐ Did see animal ☐ Did not see animal		33. Head examination is ☐ Requested ☐ Not Warranted				
	LABORATORY	34. Remarks:						
		35. Head sent to Lab: DATE BY TELEPHONE						
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:								
38. ☐ Case Closed: Date: By:								
39. Officer Completing Form: Lawson Telephone: 413 781 1484								

Date of Report: 07/17/2022		ANIMAL BITE REPORT Rabies Control Investigation Thomas J. O'Connor Animal Control				1. Bite Number: B22-003155		
I. ANIMAL/BITE BITTEN	IDENTIFICATION	2. Name (Last, First)		3. ID # A058602	4. Sex	5. Age DOB	6. Telephone	
		7. Address (No. & Street) (City) (State) (Zip) Bongiovanni Bunny/chickens						
		8. Name of Parent or Guardian (if victim is a minor) BONGIOVANNI, CORIE (P033538)				9. Address (if different) 113 HARVARD ST, SPRINGFIELD, MA 01109		
		10. Source of Information Cori				Victim Telephone - Other		
	EXPOSURE	11. Place of attack 113 HARVARD ST				12. Time and Date of attack July 16, 2022 10:30 pm		
		13. Circumstances of attack: mauled / killed chickens + rabbit						
		14. Location and description of wound(s): mauled						
	TREATMENT	15. Was wound treated? ☐ No ☐ Yes Date: N/A				16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. N/A Telephone		
		17. Details of wound treatment ☐ Washed ☐ Sutured N/A				18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?		
		19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? N/A				Telephone:		
On 7/16/22, Orion and Ace allegedly entered the property at 113 Harvard St and ripped open the coop and hutch and mauled/killed 5 chickens and 1 domestic rabbit. Owner of deceased animals has both dogs on her security system								
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) WRIGHT, KCHAWN			21. ID # P046349	Telephone: (770) 652-7110		
		22. Address (No. & Street) (City) (State) (Zip) 33 WELLESLEY ST SPRINGFIELD, MA 01109						
		23. Type of animal MALE, DOG			ID # A058599	☒ Owned ☐ Stray ☐ Wild	Est. Age: NO AGE	
		24. Description: (Breed, color, etc.) BLACK / WHITE SIBERIAN HUSKY			25. License Tag: unlicensed			Expires:
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☐ Yes ☒ No			
		28. Vaccinated against rabies? YES Vet: Petco			Vaccination Date 3/21/20	Rabies Tag Number 22135051	☐ 1 Year Vaccine ☒ 3 Year Vaccine	
	QUARANTINE	29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 07/16/2022 To Date: 07/26/2022						
		30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☐ No				31. Date sent to Animal Inspector/Board of Health via e-mail 7/20/22		
	III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:					
			32. Veterinarian ☐ Did see animal ☐ Did not see animal		33. Head examination is ☐ Requested ☐ Not Warranted			
34. Remarks:								
LABORATORY		35. Head sent to Lab: DATE BY TELEPHONE						
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
	37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:							
38. ☒ Case Closed: Date: 7/27/22 By: SANBORN								
39. Officer Completing Form: SANBORN Telephone: 781-1484								

Date of Report: 07/17/2022		ANIMAL BITE REPORT Rabies Control Investigation Thomas J. O'Connor Animal Control				1. Bite Number: B22-003155			
I. ANIMAL/PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) BONGIOVANNI Chicken + Bunny		3. ID # A058602	4. Sex	5. Age	DOB	6. Telephone	
	EXPOSURE	7. Address (No. & Street) (City) (State) (Zip) 113 Harvard St. Springfield, MA							
	TREATMENT	8. Name of Parent or Guardian (if victim is a minor) BONGIOVANNI, CORIE (P033538)				9. Address (if different) 113 HARVARD ST, SPRINGFIELD, MA 01109			
		10. Source of Information Cori B				Victim Telephone - Other			
		11. Place of attack 113 HARVARD ST				12. Time and Date of attack July 16, 2022 10:30 pm			
		13. Circumstances of attack: mauled/killed chickens + Bunny							
	14. Location and description of wound(s):								
	MISC.	15. Was wound treated? ☐ No ☐ Yes Date: N/A							
		16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. N/A Telephone							
		17. Details of wound treatment ☐ Washed ☐ Sutured N/A							
18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?									
19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? N/A Telephone:									
On 7/16/22, Orion and Ace allegedly entered the property at 113 Harvard St and ripped open the coop and hutch and mauled/killed 5 chickens and 1 domestic rabbit. Owner of deceased animals has both dogs on her security system									
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) WRIGHT, KCHAWN			21. ID # P046349	Telephone: (770) 652-7110			
	QUARANTINE	22. Address (No. & Street) (City) (State) (Zip) 33 WELLESLEY ST SPRINGFIELD, MA 01109							
		23. Type of animal MALE, DOG			ID # A058598	☒ Owned ☐ Stray ☐ Wild	Est. Age: NO AGE		
		24. Description: (Breed, color, etc.) ORION WHITE SIBERIAN HUSKY			25. License Not Licensed Tag: Year: Expires:				
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☐ Yes ☒ No				
		28. Vaccinated against rabies? YES Vet: Petco			Vaccination Date 3/21/20	Rabies Tag Number 22135052	☐ 1 Year Vaccine ☒ 3 Year Vaccine		
		29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 07/16/2022 To Date: 07/26/2022							
		30. If at owner's home, have quarantine guidelines been explained? ☐ Yes ☐ No				31. Date sent to Animal Inspector/Board of Health Via e-mail 7/20/22			
	III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:						
LABORATORY		32. Veterinarian ☐ Did see animal ☐ Did not see animal 33. Head examination is ☐ Requested ☐ Not Warranted							
		34. Remarks:							
		35. Head sent to Lab: DATE BY TELEPHONE							
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY							
37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:									
38. ☒ Case Closed: Date: 7/27/22 By: SANBORN									
39. Officer Completing Form: SANBORN Telephone: 781-1484									



Activity Card
A25-084276-1

A25-084276-1

STRAY/ROAM

Priority Level: 3

Total Animals: 2

Animal Type: DOG

Activity Address: KING ST

Activity Comment: multiple calls w/dif. description of 2 dogs running loose in area, ended up being two M huskys - running in road way, blocked traffic, coaxed wh. one over and jumped in front seat then blk/wh. followed, soaking wet, dirty, smell of skunk..

Caller Information:

P000203 SPRINGFIELD POLICE
 SPRINGFIELD, MA 01105
 130 PEARL ST 4TH
 (413) 787-6302

Owner Information:

P054656 SHAVON DIAZ
 SPRINGFIELD, MA 01109
 42 CORNELL ST
 (413) 222-1438

Animal Information:

A058598 Orion - 5Y Male White Siberian Husky

Officer: P999920 RONDINELLO **Clerk:** 114075

Results:

Call Date: 03/31/25 08:32 AM

2 IMPND

New Date: 03/31/25 08:32 AM

Dispatch Date:

Working Date: 03/31/25 08:44 AM

Complete Date: 03/31/25 08:46 AM



Activity Card
A25-084276-2

A25-084276-2

STRAY/ROAM

Priority Level: 3

Total Animals: 2

Animal Type: DOG

Activity Address: KING ST

Activity Comment: multiple calls w/dif. description of 2 dogs running loose in area, ended up being two M huskys - running in road way, blocked traffic, coaxed wh. one over and jumped in front seat then blk/wh. followed, soaking wet, dirty, smell of skunk..

Caller Information:

P000203 SPRINGFIELD POLICE
 SPRINGFIELD, MA 01105
 130 PEARL ST 4TH
 (413) 787-6302

Owner Information:

P054656 SHAVON DIAZ
 SPRINGFIELD, MA 01109
 42 CORNELL ST
 (413) 222-1438

Animal Information:

A058599 Ace - 6Y Male Black/White Siberian Husky

Officer: P999920 RONDINELLO **Clerk:** 114075

Results:

Call Date: 03/31/25 08:32 AM

2 IMPND

New Date: 03/31/25 08:32 AM

Dispatch Date:

Working Date: 03/31/25 08:44 AM

Complete Date: 03/31/25 08:46 AM



Activity Card
A25-087208-1

A25-087208-1

STRAY/INJURED

Priority Level: 2

Total Animals: 1

Animal Type: **CAT**

Activity Address: 36 DARTMOUTH ST

Activity Comment: RP states heard 2 loose husky type dogs outside mauling a cat. States cat still alive and dogs ran down the street. Cat was DOA. Circled the block trying to locate the dogs - UTL. SEE NOTE

Caller Information:

P059678 MARY TAYLOR
SPRINGFIELD, MA 01109
36 DARTMOUTH ST
(413) 315-0005

Owner Information:

P050635 MSHAE HUDSON
SPRINGFIELD, MA 01109
12 MCKNIGHT ST
(413) 459-3836

Animal Information:

A069333 Willow - 6Y Male Gray Tabby Domestic Sh

Officer: P052479 LAWSON **Clerk:** 117246

Results:

Call Date: 11/17/25 09:34 PM
New Date: 11/17/25 09:34 PM
Dispatch Date:
Working Date: 11/17/25 09:48 PM
Complete Date: 11/17/25 10:02 PM

1 IMPND
2 UTL
2 RPRT
1 CITE

Memos:

M25-026346 11/18/2025

The following day, 11/18/25, I found video of the two loose huskies in the Mcknight area of Springfield posted on Facebook. 1 husky was all white and 1 husky was black or gray and white. This is the same description of the 2 dogs seen attacking the cat by Mary Taylor who was the initial reporting party located at 36 Dartmouth St Springfield. Upon further searches of our system I found 2 dogs in the area that match the description and the behaviors of the 2 loose dogs from lastnight. These dogs (Orion A058598 and Ace A058599) are frequently loose and have attacked and killed other animals before (activity # 22-072030). ACO's have had frequent encounters with both dogs over the last few years. I contacted current owner Shavon Diaz via phone at 413-222-1438 who confirmed that her dogs were in fact out roaming overnight. ACO Sanborn was present for this conversation as a witness. In previous ACO history, the dogs have been listed under ownership of Kchawn Wright P046349. Diaz explained that when she woke up this morning, both dogs were on her front porch and are back home safely at 42 Cornell St in Springfield. Diaz seemed unbothered by the fact that her 2 dogs had taken the life of a cat while out roaming. I explained that she was responsible for keeping the dogs safely confined to her property to which she responded "we try, but they are huskies". At this point I have issued a citation and advised all parties involved of their right to file a dangerous/nuisance dog hearing.

It should be noted that Orion's rabies vaccine has expired as of 10/30/25. Shavob Diaz was cited for S/N viol x2, 1st offense LL viol x2, unvaccinated x1. 2x bite reports were also completed as the witnesses to this altercation described both dogs attacking and killing the victim cat.



Activity Card
A25-087208-2

A25-087208-2

STRAY/ROAM

Priority Level: 3

Total Animals: 2

Animal Type: DOG

Activity Address: 36 DARTMOUTH ST

Activity Comment: RP states heard 2 loose husky type dogs outside mauling a cat. States cat still alive and dogs ran down the street. Cat was DOA. Circled the block trying to locate the dogs - UTL. SEE NOTE

Caller Information:

P059678 MARY TAYLOR
SPRINGFIELD, MA 01109
36 DARTMOUTH ST
(413) 315-0005

Owner Information:

P054656 SHAVON DIAZ
SPRINGFIELD, MA 01109
42 CORNELL ST
(413) 222-1438

Animal Information:

A058598 Orion - 5Y Male White Siberian Husky

Officer: P052479 LAWSON **Clerk:** 117246

Results:

Call Date: 11/17/25 09:34 PM
New Date: 11/17/25 09:34 PM
Dispatch Date:
Working Date: 11/17/25 09:48 PM
Complete Date: 11/17/25 10:02 PM

1 IMPND
2 UTL
2 RPRT
1 CITE

Memos:

M25-026346 11/18/2025

The following day, 11/18/25, I found video of the two loose huskies in the Mcknight area of Springfield posted on Facebook. 1 husky was all white and 1 husky was black or gray and white. This is the same description of the 2 dogs seen attacking the cat by Mary Taylor who was the initial reporting party located at 36 Dartmouth St Springfield. Upon further searches of our system I found 2 dogs in the area that match the description and the behaviors of the 2 loose dogs from lastnight. These dogs (Orion A058598 and Ace A058599) are frequently loose and have attacked and killed other animals before (activity # 22-072030). ACO's have had frequent encounters with both dogs over the last few years. I contacted current owner Shavon Diaz via phone at 413-222-1438 who confirmed that her dogs were in fact out roaming overnight. ACO Sanborn was present for this conversation as a witness. In previous ACO history, the dogs have been listed under ownership of Kchawn Wright P046349. Diaz explained that when she woke up this morning, both dogs were on her front porch and are back home safely at 42 Cornell St in Springfield. Diaz seemed unbothered by the fact that her 2 dogs had taken the life of a cat while out roaming. I explained that she was responsible for keeping the dogs safely confined to her property to which she responded "we try, but they are huskies". At this point I have issued a citation and advised all parties involved of their right to file a dangerous/nuisance dog hearing.

It should be noted that Orion's rabies vaccine has expired as of 10/30/25. Shavob Diaz was cited for S/N viol x2, 1st offense LL viol x2, unvaccinated x1. 2x bite reports were also completed as the witnesses to this altercation described both dogs attacking and killing the victim cat.



Activity Card
A25-087208-3

A25-087208-3

STRAY/ROAM

Priority Level: 3

Total Animals: 2

Animal Type: DOG

Activity Address: 36 DARTMOUTH ST

Activity Comment: RP states heard 2 loose husky type dogs outside mauling a cat. States cat still alive and dogs ran down the street. Cat was DOA. Circled the block trying to locate the dogs - UTL. SEE NOTE

Caller Information:

P059678 MARY TAYLOR
SPRINGFIELD, MA 01109
36 DARTMOUTH ST
(413) 315-0005

Owner Information:

P054656 SHAVON DIAZ
SPRINGFIELD, MA 01109
42 CORNELL ST
(413) 222-1438

Animal Information:

A058599 Ace - 6Y Male Black/White Siberian Husky

Officer: P052479 LAWSON **Clerk:** 117246

Call Date: 11/17/25 09:34 PM
New Date: 11/17/25 09:34 PM
Dispatch Date:
Working Date: 11/17/25 09:48 PM
Complete Date: 11/17/25 10:02 PM

Results:

1 IMPND
2 UTL
2 RPRT
1 CITE

Memos:

M25-026346 11/18/2025

The following day, 11/18/25, I found video of the two loose huskies in the Mcknight area of Springfield posted on Facebook. 1 husky was all white and 1 husky was black or gray and white. This is the same description of the 2 dogs seen attacking the cat by Mary Taylor who was the initial reporting party located at 36 Dartmouth St Springfield. Upon further searches of our system I found 2 dogs in the area that match the description and the behaviors of the 2 loose dogs from lastnight. These dogs (Orion A058598 and Ace A058599) are frequently loose and have attacked and killed other animals before (activity # 22-072030). ACO's have had frequent encounters with both dogs over the last few years. I contacted current owner Shavon Diaz via phone at 413-222-1438 who confirmed that her dogs were in fact out roaming overnight. ACO Sanborn was present for this conversation as a witness. In previous ACO history, the dogs have been listed under ownership of Kchawn Wright P046349. Diaz explained that when she woke up this morning, both dogs were on her front porch and are back home safely at 42 Cornell St in Springfield. Diaz seemed unbothered by the fact that her 2 dogs had taken the life of a cat while out roaming. I explained that she was responsible for keeping the dogs safely confined to her property to which she responded "we try, but they are huskies". At this point I have issued a citation and advised all parties involved of their right to file a dangerous/nuisance dog hearing.

It should be noted that Orion's rabies vaccine has expired as of 10/30/25. Shavob Diaz was cited for S/N viol x2, 1st offense LL viol x2, unvaccinated x1. 2x bite reports were also completed as the witnesses to this altercation described both dogs attacking and killing the victim cat.

Animal No:

A058598

Thomas J. O'Connor

Kennel Card



Name:

Orion

Color:

White

Breed:

Siberian Husky

Sex:

Male

Age:

5 YR MO

Collar Color / Type:

Microchip Scan: **POSITIVE**

Microchip #:

Other Id #:

Treatment	Date	
Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

3/31/2025

Review Date:

4/8/2025

Intake Type:

STRAY / FIELD

Intake By:

TR

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

KING/LEBANON



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Animal No:

A058598

Thomas J. O'Connor

Kennel Card



Name:

Orion

Color:

White

Breed:

Siberian Husky

Sex:

Male

Age:

5 YR MO

Collar Color / Type:

Microchip Scan: **POSITIVE**

Microchip #:

Other Id #:

Treatment	Date	
Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

10/29/2024

Review Date:

11/6/2024

Intake Type:

STRAY / OTC

Intake By:

AP

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

91 NORTH 1 MILE FROM EXIT 3



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Animal No:

A058598

Thomas J. O'Connor

Kennel Card



Name:

Orion

Color:

White

Breed:

Siberian Husky

Sex:

Male

Age:

5 YR MO

Collar Color / Type:

Microchip Scan: **POSITIVE**

Microchip #:

Other Id #:

Treatment

Date

Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

11/19/2023

Review Date:

11/27/2023

Intake Type:

STRAY / OTC

Intake By:

EM

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

BAY AND PRINCETON STS



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Animal No:

A058599

Thomas J. O'Connor

Kennel Card



Name:

Ace

Color:

Black & White

Breed:

Siberian Husky

Sex:

Male

Age:

6 YR MO

Collar Color / Type:

Microchip Scan: **NEGATIVE**

Microchip #:

Other Id #:

Treatment

Date

Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

10/29/2024

Review Date:

11/6/2024

Intake Type:

STRAY / OTC

Intake By:

AP

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

91 NORTH 1 MILE FROM EXIT 3



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Animal No:

A058599

Thomas J. O'Connor

Kennel Card



Name:

Ace

Color:

Black & White

Breed:

Siberian Husky

Sex:

Male

Age:

6 YR MO

Collar Color / Type:

Microchip Scan: **NEGATIVE**

Microchip #:

Other Id #:

Treatment	Date	
Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

11/19/2023

Review Date:

11/27/2023

Intake Type:

STRAY / OTC

Intake By:

EM

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

BAY AND PRINCETON STS



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____



Citation-Violation Detail

Violation Number V22-001831

Violation Date: 8/21/2022 8:01AM

Violation Type: CITATION

Form No: 229518

DEFENDANT KCHAWN WRIGHT 42 CORNELL ST SPRINGFIELD, MA 01109 (413) 883-0199 (413) 222-1438	COMPLAINANT
---	--------------------

Issued By: P030355 - OFFICER SANBORN

Activity: A22-072045-2

LOCATION OF VIOLATION HARVARD ST	JURISDICTION SPRINGFIELD	APPROVED
SYNOPSIS On 7/16/22, Ace and Orion were running at large and are captured on video at 113 Harvard St. 5 chickens and 1 domestic rabbit were killed by the dogs. Home Q was completed. As of 8-21-22, owner has failed to license both his dogs.		

OFFENSES		
LL-1ST-507 x1	A058599 - ACE BLACK/WHITE M SIBERIAN HUSKY	\$50.00
LIC VIOL-506 x1	A058599 - ACE BLACK/WHITE M SIBERIAN HUSKY	\$50.00
S/N VIOL-510 x1	A058599 - ACE BLACK/WHITE M SIBERIAN HUSKY	\$100.00
LL-1ST-507 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$50.00
LIC VIOL-506 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$50.00
S/N VIOL-510 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$100.00
		\$400.00



Citation-Violation Detail

Violation Number V25-002670

Violation Date: 11/17/2025 9:35PM

Violation Type: CITATION

Form No: 227699

DEFENDANT SHAVON DIAZ 42 CORNELL ST SPRINGFIELD, MA 01109 (413) 222-1438 (413) 330-5974 (413) 221-9497	P054656	COMPLAINANT
---	----------------	--------------------

Issued By: P052479 - OFFICER LAWSON

Activity: A25-087208-1

LOCATION OF VIOLATION

DARTMOUTH ST

JURISDICTION

SPRINGFIELD

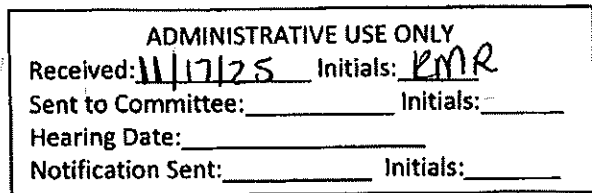
APPROVED

SYNOPSIS

Orion & Ace were out roaming loose & attacked a cat resulting in death. 1x unvax for Orion. 2x 1st off LL, 2x S/N viol.

OFFENSES

UNVACC-511 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$50.00
LL-1ST-507 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$50.00
LL-1ST-507 x1	A058599 - ACE BLACK/WHITE M SIBERIAN HUSKY	\$50.00
S/N VIOL-510 x1	A058598 - ORION WHITE M SIBERIAN HUSKY	\$100.00
S/N VIOL-510 x1	A058599 - ACE BLACK/WHITE M SIBERIAN HUSKY	\$100.00
		\$350.00



NEXT PAGE>>>>>>>>>

Brief Description of Incident:

ATTACHMENT: YES / NO

please see letter & pictures

RESPONDENT INFORMATION

Do you know the name or address of the owner of the dog(s)? YES / NO

Name: _____

Street Address: 40 Adams St Spring Field MA

Phone: _____ Phone: _____

Email: _____

DOG INFORMATION

Name: _____ Sex: M

Breed: Lab

Primary Color: White Secondary Color: _____

Name: Rex Sex: M

Breed: Pitbull

Primary Color: Red Secondary Color: _____

Gladys Oyola-Lopez
City Clerk

City Clerk's Office
36 Court Street, Room 123
Springfield, MA 01103



THE CITY OF SPRINGFIELD, MASSACHUSETTS

Edwin Gonzalez
40 Adams Street
Springfield, MA 01105

January 16, 2024

Dear Mr. Gonzalez:

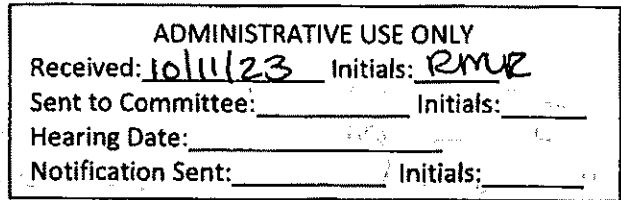
A hearing was held on January 9, 2024 in accordance with Chapter 110, Section 10 of the Code of the City of Springfield, 2012, as amended for dangerous dog hearing for your dogs named White Boy and Princes was declared **No Finding**.

Any appeal of this decision may be filed in District Court in according with Chapter 140, Section 157(a) (4) (d) of the Massachusetts General Laws. Further information may be obtained from the Thomas J. O'Connor Animal Control Center, 627 Cottage Street, Springfield, Massachusetts, 413-781-1484.

Sincerely,


Gladys Oyola-Lopes
City Clerk

Gladys Oyola-Lopez



City of Springfield Ordinances: Chapter 110-10 Dangerous Dogs and Nuisance Dogs

Date of Request: 10/7/23

Name: Amy Hendrickson
Street Address: 79 Oswego St LI
Phone: 857-233-8599 Phone: 957-233-8599
Email: hendricksonamy29@gmail.com

Date of Incident: 10/6/23

Were the police called? YES / (NO) Date(s): _____

Was Animal Control called? (YES) / NO Date(s): 10/10/23 - no records of call

Did anyone receive medical treatment from hospital / urgent care / physician? YES / (NO) on That

Name of injured party: n/a date

Where did they receive treatment? n/a Date: n/a PR

NEXT PAGE>>>>>>>>

Brief Description of Incident:

ATTACHMENT: YES / NO

10/6 - I was walking my dog - # (3) unleash dogs were walking - around the area of Oswego St - through out to Adams St. My dog is leashed & (2) females (White Lab) (Black pit bull) attack from the back - I kicked the Black dog & the Big White male - CAME viciously went after my dog's neck. These dogs terrify the neighbor & it is nerve wrecking to think you always have to be extra cautious while walking

RESPONDENT INFORMATION

Do you know the name or address of the owner of the dog(s)? YES / ~~NO~~ UP.

Name: Edwin Gonzales PO50351

Street Address: 40 Adams St (Blue House)

Phone: 413-739-2893 Phone: _____

Email: _____

DOG INFORMATION

Name: "White Boy" A058516 Sex: Male

Breed: White Lab

Primary Color: White Secondary Color: _____

Name: "Princess" A058515 Sex: (2) Females

Breed: White Lab

Primary Color: White Secondary Color: _____

Dog #3. unknown to Animal Control - RR
Pitbull - Black / White (chest)



Activity Card
A23-077351-1

A23-077351-1

STRAY/AGGRS

Priority Level: 2

Total Animals: 2

Animal Type: DOG

Activity Address: 40 ADAMS ST

Activity Comment: Complaint dogs were loose and trying to bite neighbor and child. On arrival dogs inside and owner arrested during incident. Older man spoke spanish. Advised complaintant how to request hearing.

Caller Information:

P000203 SPRINGFIELD POLICE
 SPRINGFIELD, MA 01105
 130 PEARL ST
 (413) 787-6302

Owner Information:

P050351 EDWIN GONZALES
 SPRINGFIELD, MA 01105
 40 ADAMS ST
 (413) 739-2893

Animal Information:

A058516 White Boy - 2Y Male White Labrador Retr

Officer: P027726 SIMPSON **Clerk:** DTS

Results:

Call Date: 08/04/23 10:44 AM
New Date: 08/04/23 10:44 AM
Dispatch Date:
Working Date: 08/04/23 11:03 AM
Complete Date: 08/04/23 11:14 AM

1 COMP
 1 EDUC

Communication: Dangerous Dog Hearing for Dogs Named White Boy & Princess at 40 Adams St Owned by Edwin Gonzalez (Dog Hearing)



Activity Card
A23-077351-2

A23-077351-2

STRAY/AGGRS

Priority Level: 2

Total Animals: 2

Animal Type: DOG

Activity Address: 40 ADAMS ST

Activity Comment: Complaint dogs were loose and trying to bite neighbor and child. On arrival dogs inside and owner arrested during incident. Older man spoke spanish. Advised complaintant how to request hearring.

Caller Information:

P000203 SPRINGFIELD POLICE
 SPRINGFIELD, MA 01105
 130 PEARL ST
 (413) 787-6302

Owner Information:

P050351 EDWIN GONZALES
 SPRINGFIELD, MA 01105
 40 ADAMS ST
 (413) 739-2893

Animal Information:

A058515 Princess - 2Y Female Yellow Labrador Retr

Officer: P027726 SIMPSON **Clerk:** DTS

Results:

Call Date: 08/04/23 10:44 AM
New Date: 08/04/23 10:44 AM
Dispatch Date:
Working Date: 08/04/23 11:03 AM
Complete Date: 08/04/23 11:14 AM

1 COMP
1 EDUC



Activity Card
A23-078378-1

A23-078378-1 **STRAY/ROAM** Priority Level: **3** Total Animals: **3** Animal Type: **DOG**

Activity Address: 40 ADAMS ST

Activity Comment: report of 3 dogs frequently loose and reportedly charged after woman scaring her and her dog

Owner Information:

Animal Information:

Officer: P999920	RONDINELLO	Clerk: 114075	Results:
Call Date:	10/10/23 07:30 PM		3 UTL
New Date:	10/10/23 07:30 PM		3 GOA
Dispatch Date:			
Working Date:	10/10/23 07:50 PM		
Complete Date:	10/10/23 07:51 PM		



Activity Card
A23-078381-1

A23-078381-1

STRAY/AGGRS

Priority Level: 2

Total Animals: 1

Animal Type: DOG

Activity Address: OSWEGO ST

Activity Comment: report of aggressive dog chasing citizen & her dog. Caller states dog resides at 40 Adams St. MC with Edwin who stated his dog is inside and was not roaming. Would not provide any further info.

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

Officer: P052479

LAWSON

Clerk: 117246

Results:

Call Date: 10/11/23 04:22 PM

1 MC

New Date: 10/11/23 04:22 PM

1 EDUC

Dispatch Date:

1 COMP

Working Date: 10/11/23 04:40 PM

Complete Date: 10/11/23 04:45 PM



Activity Card
A23-078440-1

A23-078440-1 **STRAY/ROAM** **Priority Level: 3** **Total Animals: 1** **Animal Type: DOG**

Activity Address: SARATOGA ST

Activity Comment: report of frequently 2 loose dogs belonging to 40 Adams St. UTL GOA - fence of 40 Adams St is closed.

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

BLK FEMALE PIT & MALE YELLOW LAB

Officer: P052479	LAWSON	Clerk: 117246	Results:
Call Date:	10/16/23 04:37 PM		2 UTL
New Date:	10/16/23 04:37 PM		2 GOA
Dispatch Date:			
Working Date:	10/16/23 04:53 PM		
Complete Date:	10/16/23 05:00 PM		



Activity Card
A23-078445-1

A23-078445-1 **INV/BITE** Priority Level: 1 Total Animals: 1 Animal Type: **DOG**

Activity Address: 65 ADAMS ST

Activity Comment: report of bite incident. 2 stray dogs from 40 Adams St were loose at time of bite. Gathered info for bite report

Caller Information:

P000203 SPRINGFIELD POLICE
SPRINGFIELD, MA 01105
130 PEARL ST 4TH
(413) 787-6302

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

A062965 Nina - 4Y Female Black Pit Bull

Officer: P052479 LAWSON **Clerk:** 117246

Results:

Call Date: 10/16/23 08:33 PM
New Date: 10/16/23 08:33 PM
Dispatch Date:
Working Date: 10/16/23 08:49 PM
Complete Date: 10/16/23 09:09 PM

2 MC
1 EDUC
1 RPRT
1 HQUAR
1 CITE



Activity Card
A23-078445-2

A23-078445-2 **INV/BITE** Priority Level: **1** Total Animals: **1** Animal Type: **DOG**

Activity Address: 65 ADAMS ST

Activity Comment: report of bite incident. 2 stray dogs from 40 Adams St were loose at time of bite. Gathered info for bite report

Caller Information:

P000203 SPRINGFIELD POLICE
SPRINGFIELD, MA 01105
130 PEARL ST 4TH
(413) 787-6302

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

A058516 Prince - 4Y Male White Labrador Retr

Officer: P052479 LAWSON **Clerk:** 117246

Call Date: 10/16/23 08:33 PM
New Date: 10/16/23 08:33 PM
Dispatch Date:
Working Date: 10/16/23 08:49 PM
Complete Date: 10/16/23 09:09 PM

Results:

2 MC
1 EDUC
1 RPRT
1 HQUAR
1 CITE



Activity Card
A24-081022-1

A24-081022-1

INV/BITEF

Priority Level: 2

Total Animals: 2

Animal Type: DOG

Activity Address: 79 OSWEGO ST 1L

Activity Comment: Follow up on dog vs dog bite that happened at approx 1926. SPD requested assistance to MC w/ both O's of dog. 10 day quarantine explained.

Caller Information:

P000203 SPRINGFIELD POLICE
SPRINGFIELD, MA 01105
130 PEARL ST 4TH
(413) 787-6302

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

A058515 Princess - 4Y Female Yellow Labrador Retr

Officer: P999921

LAZU

Clerk: 118454

Results:

Call Date: 06/07/24 09:16 PM
New Date: 06/07/24 09:16 PM
Dispatch Date:
Working Date: 06/07/24 09:20 PM
Complete Date: 06/07/24 09:38 PM

1 MC
1 RPRT
1 HQUAR
1 EDUC



Activity Card
A24-082873-1

A24-082873-1 **STRAY/ROAM** Priority Level: **3** Total Animals: **1** Animal Type: **DOG**

Activity Address: ADAMS ST

Activity Comment: Two, loose yellow labs. Loose fo two hours.

Owner Information:

P050351 EDWIN GONZALES
SPRINGFIELD, MA 01105
40 ADAMS ST
(413) 739-2893

Animal Information:

A058516 Prince - 4Y Male White Labrador Retr

Officer: P025253	MATEO	Clerk: MATEO	Results:
Call Date:	11/17/24 12:00 PM		1 IMPND
New Date:	11/17/24 12:00 PM		
Dispatch Date:			
Working Date:	11/17/24 12:15 PM		
Complete Date:	11/17/24 12:33 PM		



Activity Card
A25-087199-1

A25-087199-1

INV/BITE

Priority Level: 2

Total Animals: 2

Animal Type: DOG

Activity Address: 40 ADAMS ST

Activity Comment: Rprt of dog vs dog. Allegedly aggressor dog was off leash and attacked victim dog. Victim dog also bit aggressor dog. Both dogs on 10d HQ. DDH form was given to victim dog O. Both O's were advised to bring dog to seek medical attention

Caller Information:

P055960 AMY HENDERICKSON
 SPRINGFIELD, MA 01105
 79 OSWEGO ST 1L
 (857) 233-8599

Owner Information:

P050351 EDWIN GONZALES
 SPRINGFIELD, MA 01105
 40 ADAMS ST
 (413) 739-2893

Animal Information:

A058516 Prince - 4Y Male White Labrador Retr

Officer: P999921 LAZU

Clerk: 118454

Results:

Call Date: 11/16/25 07:21 PM
New Date: 11/16/25 07:21 PM
Dispatch Date:
Working Date: 11/16/25 07:35 PM
Complete Date: 11/16/25 07:58 PM

2 MC
2 EDUC
2 RPRT
2 HQUAR



Activity Card
A25-087206-1

A25-087206-1

STRAY/ROAM

Priority Level: 3

Total Animals: 1

Animal Type: DOG

Activity Address: 76 OSWEGO ST

Activity Comment: Amy's dog was bit by "Prince" yesterday. Called to report that she saw Mr. Gonzales w/ Prince off property near 76 Oswego St. Prince should be on HQUAR. Went to locate the pair. UTL. Circled the area. No photo's obtained by RP.

Caller Information:

P055960 AMY HENDERICKSON
 SPRINGFIELD, MA 01105
 79 OSWEGO ST 1L
 (857) 233-8599

Owner Information:

P050351 EDWIN GONZALES
 SPRINGFIELD, MA 01105
 40 ADAMS ST
 (413) 739-2893

Animal Information:

A058516 Prince - 4Y Male White Labrador Retr

Officer: P052479 LAWSON **Clerk:** 117246

Results:

Call Date: 11/17/25 06:25 PM

1 UTL

New Date: 11/17/25 06:25 PM

Dispatch Date:

Working Date: 11/17/25 06:40 PM

Complete Date: 11/17/25 06:50 PM

Animal No:

A058515

Thomas J. O'Connor

Kennel Card



Name:

Princess

Color:

Yellow

Breed:

Labrador Retr

Sex:

Female

Age:

1 YR 6 MO

Collar Color / Type:

Microchip Scan: **POSITIVE**

Microchip #:

Other Id #:

Treatment

Date

Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

11/15/2024

Review Date:

11/23/2024

Intake Type:

STRAY / FIELD

Intake By:

EM

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

ADAMS ST



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCOLOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DISEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Animal No:

A058516

Thomas J. O'Connor

Kennel Card



Name:

Prince

Color:

White

Breed:

Labrador Retr

Sex:

Male

Age:

1 YR 6 MO

Collar Color / Type:

Microchip Scan: **POSITIVE**

Microchip #: 991001004229508

Other Id #:

Treatment

Date

Rabies		Producer: Lot: Lot Exp: Vet:
DHPP / FVRCP		
Booster		
Deworm		
Flea / Tick		
HW / 4DX FELV / COMBO		

Intake Date:

11/15/2024

Review Date:

11/23/2024

Intake Type:

STRAY / FIELD

Intake By:

EM

Jurisdiction:

SPRINGFIELD

Found @ / Comments:

ADAMS ST



INTAKE EXAM

Date: _____

Staff: _____

TEMPERATURE: _____

WEIGHT: _____

AGE:

___ Puppy / Kitten

___ Young Adult

___ Adult

___ Senior

OVERALL APPEARANCE:

___ Alert

___ Lethargic

___ Unresponsive

BEHAVIOR ASSESSMENT:

___ Friendly

___ Fearful

___ Aggressive

MUSCULOSKELETAL:

___ Normal

___ Lameness

___ Other: _____

EYES: ___ Clear

___ Discharge: _____

EARS: ___ Clean

___ Inflamed

___ Odorous

NOSE: ___ Clear

___ Discharge: _____

MOUTH: ___ Normal

___ Broken / Missing Teeth

___ Other: _____

DENTAL DESEASE:

___ Mild

___ Moderate

___ Severe

SKIN: ___ Fleas / Ticks

___ Hair Loss: _____

___ Other: _____

BODY CONDITION:

___ Emaciated

___ Thin

___ Normal

___ Overweight

___ Obese

NOTES: _____

Date of Report: 11/16/2025

ANIMAL BITE REPORT

Rabies Control Investigation

Thomas J. O'Connor Animal Control

 1. Bite Number:
B25-004289

I. ANIMAL/PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) "Prince"	3. ID # A058516	4. Sex M	5. Age	DOB	6. Telephone	
		7. Address (No. & Street) (City) (State) (Zip) 40 Adams St Springfield MA 01105						
		8. Name of Parent or Guardian (if victim is a minor) GONZALES, EDWIN (P050351) (NONE)			9. Address (if different) 40 ADAMS ST, SPRINGFIELD, MA 01105			
	EXPOSURE	10. Source of Information P050351			Victim Telephone - Other			
		11. Place of attack OSWEGO ST			12. Time and Date of attack November 16, 2025 9:17 pm			
13. Circumstances of attack: PROVOKED								
TREATMENT	14. Location and description of wound(s): R EYE, LVL 3							
	15. Was wound treated? ☒ No ☐ Yes Date:			16. Wound treated by: ☒ Self ☐ Parent ☐ Dr. Telephone				
	17. Details of wound treatment ☒ Washed ☐ Sutured			18. Anti-Rabies Treatment Recommended? ☒ No ☐ Yes By Whom?				
MISC.	19. Anti-Rabies Treatment Given? ☒ No ☐ Yes By Whom? Telephone:							
	Rpt of dog vs dog. Allegedly aggressor dog was off leash and attacked victim dog. Victim dog also bit aggressor dog. Both dogs on 10d HQ. DDH form was given to victim dog O. Both O's were advised to bring dog to seek medical attention							
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) HENDERICKSON, AMY			21. ID # P055960		Telephone: (857) 233-8559	
		22. Address (No. & Street) (City) (State) (Zip) 79 OSWEGO ST APT 1L SPRINGFIELD, MA 01105						
		23. Type of animal MALE, DOG			ID # A064850	☒ Owned ☐ Stray ☐ Wild	Est. Age: 4 YEARS	
		24. Description: (Breed, color, etc.) RED PIT BULL			25. License Tag: Year: Expires:			
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☒ Yes ☐ No			
		28. Vaccinated against rabies? UNK Vet:			Vaccination Date Rabies Tag Number ☐ 1 Year Vaccine ☐ 3 Year Vaccine			
	QUARANTINE	29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 11/16/2025 To Date: 11/26/2025						
		30. If at owner's home, have quarantine guidelines been explained? ☒ Yes ☐ No						31. Date sent to Animal Inspector/Board of Health Emailed 11/17/25 MM
		32. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date: 33. Veterinarian ☐ Did see animal ☐ Did not see animal 33. Head examination is ☐ Requested ☐ Not Warranted 34. Remarks:						
III. DISPOSITION OF ANIMAL	REVIEW							
	LABORATORY	35. Head sent to Lab: DATE BY TELEPHONE						
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
		37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:						
38. ☐ Case Closed: Date: By:								
39. Officer Completing Form: LAZU Telephone: 413-781-1484								

Date of Report: 10/16/2023		ANIMAL BITE REPORT				1. Bite Number: B23-003581		
Rabies Control Investigation								
Thomas J. O'Connor Animal Control								
I. ANIMAL/PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) RIOS, OLGA		3. ID # P054338	4. Sex F	5. Age DOB	6. Telephone (413) 727-4150	
		7. Address (No. & Street) 109 SCHOOL ST		(City) SPRINGFIELD, MA	(State) 01105	(Zip)		
		8. Name of Parent or Guardian (if victim is a minor)			9. Address (if different)			
		10. Source of Information Self			Victim Telephone - Other			
	EXPOSURE	11. Place of attack 65 ADAMS ST			12. Time and Date of attack October 16, 2023 8:30 pm			
		13. Circumstances of attack: UNPROVOKED						
		14. Location and description of wound(s): L LEG, LVL 2						
	TREATMENT	15. Was wound treated? ☒ No ☐ Yes Date:			16. Wound treated by: ☐ Self ☐ Parent ☐ Dr. Telephone			
		17. Details of wound treatment ☐ Washed ☐ Sutured			18. Anti-Rabies Treatment Recommended? ☐ No ☐ Yes By Whom?			
		19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom?			Telephone:			
19. Anti-Rabies Treatment Given? ☐ No ☐ Yes By Whom? Telephone:								
MISC.	Olga was exiting her daughters house to walk her dog when she was approached by Nina who grabbed Olga's pant leg and and began thrashing her around. Received scratches to her L Leg.							
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) GONZALES, EDWIN			21. ID # P050351	Telephone: (413) 739-2893		
		22. Address (No. & Street) 40 ADAMS ST		(City) SPRINGFIELD, MA	(State) 01105	(Zip)		
		23. Type of animal FEMALE, DOG		ID # A062965	☒ Owned ☐ Stray ☐ Wild	Est. Age: 2 YEARS		
		24. Description: (Breed, color, etc.) BLACK PIT BULL		NINA		25. License Tag: Year: Expires:		
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal		27. Prior Bites? ☐ Yes ☐ No				
		28. Vaccinated against rabies? UNKNOWN Vet:		Vaccination Date		Rabies Tag Number		☐ 1 Year Vaccine ☐ 3 Year Vaccine
	QUARANTINE	29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HQUAR From Date: 10/16/2023 To Date: 10/26/2023						
		30. If at owner's home, have quarantine guidelines been explained? ☒ Yes ☐ No					31. Date sent to Animal Inspector/Board of Health Emailed 10/16/23	
	III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:					
			32. Veterinarian ☐ Did see animal ☐ Did not see animal		33. Head examination is ☐ Requested ☐ Not Warranted			
34. Remarks:								
LABORATORY		35. Head sent to Lab:		DATE		BY		TELEPHONE
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
	37. Victim notified by: ☐ Person ☒ Phone ☐ Mail		Date: 10/27/23		By: LAWSON			
		38. ☒ Case Closed:		Date: 10/27/23		By: LAWSON		
39. Officer Completing Form: LAWSON Telephone: 413 781 1484								

Date of Report: 06/07/2024		ANIMAL BITE REPORT				1. Bite Number: B24-003788	
Rabies Control Investigation							
Thomas J. O'Connor Animal Control							
I. ANIMAL PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) Rex		3. ID #	4. Sex M	5. Age 3	
		7. Address (No. & Street) 79 Oswego St Apt 1L		(City) Spfld	(State) MA	(Zip) 01105	
		8. Name of Parent or Guardian (if victim is a minor) HENDERICKSON, AMY (P055960)		9. Address (if different) 79 OSWEGO ST APT 1L, SPRINGFIELD, MA 01105			
		10. Source of Information P055960		Victim Telephone - Other			
	EXPOSURE	11. Place of attack DWIGHT ST EXT/ ADAMS ST		12. Time and Date of attack June 7, 2024 7:26 pm			
		13. Circumstances of attack: UNPROVOKED					
		14. Location and description of wound(s): ALL OVER, LVL 4					
	TREATMENT	15. Was wound treated? ☒ No ☐ Yes Date:		16. Wound treated by: ☒ Self ☐ Parent ☐ Dr. Telephone			
		17. Details of wound treatment ☒ Washed ☐ Sutured		18. Anti-Rabies Treatment Recommended? ☒ No ☐ Yes By Whom?			
		19. Anti-Rabies Treatment Given? ☒ No ☐ Yes By Whom?		Telephone:			
MISC.	O was Rex was walking dog when Princess came out running and attacked Rex, resulting in "multiple puncture wounds all over body". O was of Rex did not take him to seek medical attention at this time						
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) GONZALES, EDWIN			21. ID # P050351	Telephone: (413) 739-2893	
		22. Address (No. & Street) 40 ADAMS ST			(City) SPRINGFIELD	(State) MA	(Zip) 01105
		23. Type of animal FEMALE, DOG			ID # A058515	☒ Owned ☐ Stray ☐ Wild	Est. Age: 3 YEARS
		24. Description: (Breed, color, etc.) YELLOW LABRADOR RETR			25. License Tag: Year: Expires:		
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☐ Yes ☒ No		
		28. Vaccinated against rabies? NO			Vaccination Date Rabies Tag Number ☐ 1 Year Vaccine ☐ 3 Year Vaccine		
	QUARANTINE	29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 06/07/2024 To Date: 06/17/2024					
		30. If at owner's home, have quarantine guidelines been explained? ☒ Yes ☐ No					
		31. Date sent to Animal Inspector/Board of Health Emailed 6/10/24 MM					
III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:					
		32. Veterinarian ☐ Did see animal ☐ Did not see animal		33. Head examination is ☐ Requested ☐ Not Warranted			
		34. Remarks:					
	LABORATORY	35. Head sent to Lab: DATE BY TELEPHONE					
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY					
		37. Victim notified by: ☐ Person ☒ Phone ☐ Mail Date: 6/17/24 By: LAZU					
38. ☒ Case Closed: Date: 6/17/24 By: LAZU							
39. Officer Completing Form: LAZU Telephone: 413-781-1484							

Date of Report: 11/16/2025

ANIMAL BITE REPORT

Rabies Control Investigation

Thomas J. O'Connor Animal Control

 1. Bite Number:
B25-004288

I. ANIMAL PERSON BITTEN	IDENTIFICATION	2. Name (Last, First) <i>"Rex"</i>		3. ID # <i>A0164850</i>	4. Sex <i>M</i>	5. Age <i>DOB</i>	6. Telephone	
		7. Address (No. & Street) (City) (State) (Zip) <i>79 OSWEGO ST APT 2L Springfield MA 01105</i>						
		8. Name of Parent or Guardian (if victim is a minor) HENDERICKSON, AMY (P055960) (NONE)			9. Address (if different) 79 OSWEGO ST APT 1L, SPRINGFIELD, MA 01105			
	EXPOSURE	10. Source of Information <i>P055960</i>			Victim Telephone - Other			
		11. Place of attack OSWEGO ST			12. Time and Date of attack November 16, 2025 9:17 pm			
TREATMENT	13. Circumstances of attack: PROVOKED							
	14. Location and description of wound(s): R EYE, LVL 3							
	15. Was wound treated? ☒ No ☐ Yes Date:			16. Wound treated by: ☒ Self ☐ Parent ☐ Dr. Telephone				
	17. Details of wound treatment ☒ Washed ☐ Sutured			18. Anti-Rabies Treatment Recommended? ☒ No ☐ Yes By Whom?				
	19. Anti-Rabies Treatment Given? ☒ No ☐ Yes By Whom?			Telephone:				
MISC.	Rpt of dog vs dog. Allegedly aggressor dog was off leash and attacked victim dog. Victim dog also bit aggressor dog. Both dogs on 10d HQ. DDH form was given to victim dog O. Both O's were advised to bring dog to seek medical attention							
II. ANIMAL/OWNER	IDENTIFICATION	20. Animal Owner (custodian) GONZALES, EDWIN			21. ID # P050351	Telephone: (413) 739-2893		
		22. Address (No. & Street) (City) (State) (Zip) 40 ADAMS ST SPRINGFIELD, MA 01105						
		23. Type of animal MALE, DOG		ID # A058516	☒ Owned ☐ Stray ☐ Wild	Est. Age: 4 YEARS		
		24. Description: (Breed, color, etc.) WHITE LABRADOR RETR PRINCE			25. License Tag: Year: Expires:			
		26. Behavior ☐ Unknown ☒ Normal ☐ Abnormal			27. Prior Bites? ☒ Yes ☐ No			
		28. Vaccinated against rabies? UNK Vet:			Vaccination Date Rabies Tag Number ☐ 1 Year Vaccine ☐ 3 Year Vaccine			
	QUARANTINE	29. ☐ Unable to locate animal ☐ Confined at TJO ☒ Animal Confined - HOME From Date: 11/16/2025 To Date: 11/26/2025						
		30. If at owner's home, have quarantine guidelines been explained? ☒ Yes ☐ No					31. Date sent to Animal Inspector/Board of Health <i>Emailed 11/17/25 MM</i>	
III. DISPOSITION OF ANIMAL	REVIEW	31. Cause of Death ☐ Illness ☐ Injury ☐ Euthanasia Date:						
		32. Veterinarian ☐ Did see animal ☐ Did not see animal			33. Head examination is ☐ Requested ☐ Not Warranted			
	34. Remarks:							
	LABORATORY	35. Head sent to Lab: DATE BY TELEPHONE						
		36. Results ☐ POSITIVE ☐ NEGATIVE ☐ UNSATISFACTORY						
37. Victim notified by: ☐ Person ☐ Phone ☐ Mail Date: By:								
38. ☐ Case Closed: Date: By:								
39. Officer Completing Form: <i>LQZU</i> Telephone: <i>413-781-484</i>								

Amy Hendrickson
79 Oswego St., Apt. L1
Springfield, MA
857-233-8599
hendricksonamy29@gmail.com

Date: November 17, 2025

Springfield Animal Control
Springfield, MA

Subject: Request for Intervention – Unleashed Aggressive Dog Attack

To Whom It May Concern,

I am writing to formally report a dangerous incident involving an unleashed and aggressive white, unneutered Labrador Retriever that occurred on Sunday, November 16, 2025, at approximately 7:30 PM on Oswego Street in Springfield.

As I was leaving my residence at 79 Oswego Street to walk my 6-year-old pit bull, Rex, the Labrador charged at us without warning. The dog was not leashed and has a known history of roaming the neighborhood unsupervised. It immediately attacked my leashed dog, biting Rex on the face and causing significant injuries to his legs.

Due to the size and strength of both adult male dogs, I was unable to restrain Rex during the attack, and he bit back while being attacked. This incident was frightening, dangerous, and entirely preventable.

These white Labradors are frequently seen roaming Springfield streets day and night. They belong to a household on Adams Street, not Oswego Street. The owner has repeatedly demonstrated negligence by allowing these dogs to wander freely and to threaten residents and pets.

I respectfully request that Animal Control document this incident, investigate the dog's owner, and take appropriate action to ensure public safety. This is an ongoing issue and requires immediate attention before a more serious injury occurs.

Thank you for your time and assistance.

Sincerely,
Amy Hendrickson



Certificate of Rabies Vaccination

Petco 3783
440 N Main St
East Longmeadow, MA 01028
VetcoClinics.com

Customer Information

Owner's Name:	Amy Hendrickson 79 Oswego St Springfield, MA 01105	Additional Account Holders:	
County:	Hampden County	Alternate Phone:	
Phone:	857-233-8599	First Visit:	01/30/2021
Email:	hendricksonamy29@gmail.com	Last Visit:	02/25/2023

Pet Information

Pet Name:	Rex	Last Visit:	02/25/2023
Breed:	Pit bull Terrier	Species:	Canine
Color:	Red		
Sex:	Male	Weight:	69.00
Age:	5 Years, 3 Months	DOB:	07/25/2020
Microchip #:		Rabies Tag:	23121194
Medications:			

Vaccine Information

Vaccination:	Rabies Vaccination 3 Year	Age at Vaccination:	2 Years, 7 Months
Date Vaccinated:	02/25/2023	Next Vaccine Due:	02/24/2026
Manufacturer:	Merck	Lot # / Serial #:	594846
Vaccine Name:	Nobivac 3-Rabies	Vaccine Expiration Date:	3/5/2024

Veterinarian

Attending Veterinarian:	Dr. Sanaa Jabar	License Number:	9145
--------------------------------	-----------------	------------------------	------

Note for VA and MD clients with Rabies Vaccinations: An Animal is not considered immunized for at least 28 days after the initial or primary vaccination is administered



Visit Summary

Petco 3783
440 N Main St
East Longmeadow, MA 01028
VetcoClinics.com

Customer Information

Owner's Name:	Amy Hendrickson 79 Oswego St Springfield, MA 01105	Additional Account Holders:	
County:	Hampden County	Alternate Phone:	
Phone:	857-233-8599	First Visit:	01/30/2021
Email:	hendricksonamy29@gmail.com	Last Visit:	02/25/2023

Pet Information

Pet Name:	Rex	Last Visit:	02/25/2023
Breed:	Pit bull Terrier	Species:	Canine
Color:	Red		
Sex:	Male	Weight:	69.00
Age:	5 Years, 3 Months	DOB:	07/25/2020
Microchip #:		Rabies Tag:	23121194
Medications:			

Rex's Visit

Thank you for visiting Vetco Clinics. Below is a summary of Rex's visit.

Date of Service: 02/25/2023

HISTORY

Pet presented for vaccines.

SUBJECTIVE

Owner reports pet is healthy, eating normally, active and showing no signs of illness.

OBJECTIVE

VETCO WELLNESS EXAM

Temperature:	100.00
Pulse:	121.00
Respiration:	22.00
Weight:	69.00
Circulatory:	Unable to Exam
Skin/Coat/Nails:	Abnormal
Respiratory:	Unable to Exam
Eyes:	Normal
Lymph Nodes:	Unable to Exam
Ears:	Unable to Exam
General Appearance:	Normal
Mouth/Dental:	Unable to Exam

Mucous Membranes: Unable to Exam
Musculoskeletal: Normal

ASSESSMENT

OK to Receive Services

PLAN

Vetco Wellness Examination

\$0.00

Canine 5-in-1 (DA2HPPv) Vaccination 3 Year

\$0.00

ROA: SQ

Site of Injection: RS

Vaccination Type (Given as): Canine 6-in-1 (DA2HPP+ Lepto)

Manufacturer: Merck

Rabies Tag _Complimentary Vetco

\$0.00

Tag #: 23121194

Healthy Dog

\$93.00

Bordetella Vaccination 1 Year

\$0.00

Vaccination Type (Given as): Oral

Manufacturer: Merck

Round/Hookworm Dewormer (Pyrantel Pamoate 50 mg/mL) 1 Year

\$0.00

CCs PO: 6.9

Leptospirosis Vaccination 1 Year

\$0.00

ROA: SQ

Site of Injection RS

Vaccination Type (Given as): Canine 6-in-1 (DA2HPP+ Lepto)

Manufacturer: Merck

Rabies Vaccination 3 Year

\$25.00

Vaccination Information: Vaccine Name: Nobivac 3-Rabies

Lot # / Serial #: 594846

Manufacturer: Merck

Exp Date: 3/5/2024

Virus Type: K

Administered: SQ

Site of Injection: RH

Materials and Disposal Fee

\$5.99

Vet Assistant: Willow B.

Estimated Tax

\$0.37

Pet Visit Total

\$124.36

Additional Information About Rex's Visit

♦ Thank you for trusting Vetco Clinics with your pet's healthcare needs. Your team today was Kiyan D., Tammi K. and Willow B. It was our pleasure serving you and your pet.

Pet Overview

Date Given	Description	Due Date
02/25/2023	Vetco Wellness Examination	02/25/2024
02/25/2023	Bordetella Vaccination	02/25/2024
02/25/2023	Round/Hookworm Dewormer (Pyrantel Pamoate 50 mg/mL)	02/25/2024
02/25/2023	Canine 5-in-1 (DA2HPPv) Vaccination	02/24/2026
02/25/2023	Leptospirosis Vaccination	02/25/2024
02/25/2023	Rabies Vaccination	02/24/2026

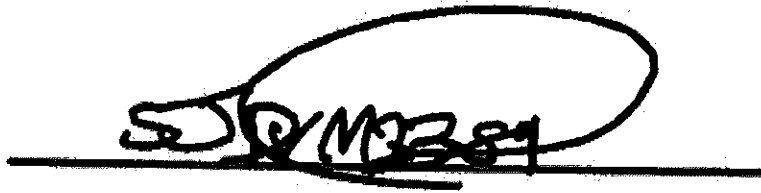
Veterinarian

Attending Veterinarian:

Dr. Sanaa Jabar

License Number:

9145

A handwritten signature in black ink, appearing to read 'SJQ/M3389', is written over a solid horizontal line. The signature is stylized and somewhat cursive.

Printed - 11/17/2025

Gladys Oyola-Lopez
City Clerk
City Clerk's Office
38 Court Street, Room 123
Springfield, MA 01103



THE CITY OF SPRINGFIELD, MASSACHUSETTS

October 23, 2025

Amanda-Lee Camacho
1859 Roosevelt Ave
Springfield, MA 01109

Dear Amanda-Lee Camacho:

On October 16, 2025, a non-compliance dog hearing was held by the Animal Control Advisory and Hearing Committee, in accordance with c. 110 § 10 of the Code of the City of Springfield (hereinafter called the "Code"), as amended October 17, 2016, for your dog, Emery.

At the Non-Compliance Hearing, the Committee found the order dated July 31, 2025, attached hereto, was a valid order and you failed to comply with said order therefore the Committee has voted to fine you Five Hundred Dollars (\$500.00) pursuant to Chapter 140 Section 157A.

Please note transferring ownership or possession of your dog is prohibited under subsection (3) of Chapter 140 Section 157A. The order, issued on July 31, 2025, is still valid.

Failure to comply with this order may result in an additional fine of up to five hundred dollars (\$500.00) or imprisonment for up to 60 days under Mass General Law Chapter 140 Section 157a. An appeal of this decision may be filed in District Court within 21 days of receiving this notice per Section 110-13(E) of the Springfield, MA ordinance

Sent regular and certified mail receipt no. 7002 2410 0004 4706 0692

Sincerely,


Gladys Oyola-Lopez
City Clerk

City of Springfield

36 Court Street – Room 123

Springfield, MA 01103

Phone: 413-787-6561

Attn: Camile Nelson Campbell

INVOICE

INVOICE: DANGEROUS DOG HEARING

DATE: OCTOBER 23, 2025

TO:

Amanda-Lee Camacho
1859 Roosevelt Avenue
Springfield, MA 01109

FOR:

Fines:
Non-Compliance

DESCRIPTION		AMOUNT
Non-Compliance Fine	1.0	\$500.00
	Total	\$500.00

FOR NUISANCE DOG HEARING ON:
10/16/2025

ON OCTOBER 16, 2025 AT THE NON-COMPLIANCE HEARING THE COMMITTEE FOUND THE ORDER WITH THE CONDITIONS ON JULY 31, 2025 WAS A VALID ORDER AND YOU FAILED TO COMPLY WITH SAID ORDER. FOR THAT REASON, THE ANIMAL CONTROL ADVISORY AND HEARING COMMITTEE VOTED TO FINE YOU FIVE HUNDRED DOLLARS (500.00) PURSUANT TO CHAPTER 140 SECTION 157A. PLEASE NOTE TRANSFERRING OWNERSHIP OR POSSESSION OF YOUR DOG IS PROHIBITED UNDER SUBSECTION (3) OF CHAPTER 140 SECTION 157A.

REMIT PAYMENT BY NOVEMBER 21, 2025

Please make bank checks or money orders made to the City of Springfield

THANK YOU FOR YOUR BUSINESS!

Gladys Oyola-Lopez
City Clerk
City Clerk's Office
38 Court Street, Room 123
Springfield, MA 01103



THE CITY OF SPRINGFIELD, MASSACHUSETTS

August 12, 2025

Amanda-Lee Camacho
1859 Roosevelt Ave
Springfield, MA 01109

Dear Amanda-Lee Camacho:

A nuisance dog hearing was held on July 31, 2025 by the Animal Control Advisory and Hearing Committee in accordance with Chapter 110, Section 10 of the Code of the City of Springfield Ordinance, 2012, as amended for dangerous dog hearing for your Emery. The committee voted to deem your dog as Nuisance and has imposed the following conditions:

The Advisory and Hearing Committee has imposed the following condition on the animal:

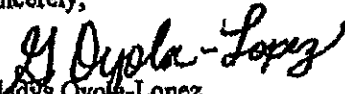
1. That the owner properly installs a sturdy fence by a fencing company and inspected by a fencing company, and be in communication with Thomas J. O'Connor (TJO) within thirty (30) days from July 31, 2025 that she has contacted a fencing company.
2. That the dog be registered and spayed. As defined in Chapter 110, Section 10-9 of the Code of the City of Springfield Ordinance.

Failure to comply with this order may result in a fine of up to five hundred dollars (\$500.00) or imprisonment for up to 60 days under Mass General Law Chapter 140 Section 157a. Please note transferring ownership or possession of your dog is prohibited under subsection (3) of Chapter 140 Section 157A

An appeal of this decision may be filed in District Court within 21 days of receiving this notice per Section 110-13(E) of the Springfield, MA ordinance. Further information regarding the requirement may be obtained from the Thomas J. O'Connor Animal Control Center, 627 Cottage Street, Springfield, Massachusetts, 413-781-1484.

Sent regular and certified mail receipt no. 9589-0710-5270-0564-8240-95

Sincerely,


Gladys Oyola-Lopez
City Clerk

GO/C Nelson Campbell