

Local Law No. 2 (Animal Management) 2019	Application for Registration/ Renewal of Registration/ Change of Details of Registration of Dog
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Application Date	___/___/___			
Application Type	<input type="checkbox"/> New registration	<input type="checkbox"/> Renewal of registration	<input type="checkbox"/> Change of registration information	
Owner Details	Full name:			
	Residential address:			
	Town:	State:	Postcode:	
	Postal address:	<input type="checkbox"/> As above		
	Town:	State:	Postcode:	
	Contact Telephone:			
	Email:			
	Pensioner:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	PERMISSION TO EMAIL:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Details of Animal	Name:			
	Registration Type:	<input type="checkbox"/> Dog		
	Breed:			
	Year of Birth/Age:	Month:	Year:	Age:
	Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
	Desexed ¹ :	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	Colour:			
	Any other distinguishing features or marks:			
	Permanent Identification Number (PID) / Microchip:	Registration Number:		
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="text-align: center;">Permanent Identification Number (PID) / Microchip</td> </tr> </table>		Permanent Identification Number (PID) / Microchip	
Permanent Identification Number (PID) / Microchip				

¹ If the dog is desexed, a veterinary surgeon's certificate must be attached to the application.

Address (at which the dog is kept)	Address: <input type="checkbox"/> As above <input type="checkbox"/> Place of Business (Please State)	
	Town:	State: Postcode:
	If the dog is to be kept at a building which is primarily used for the undertaking of a business or commercial purpose, then the dog owner occupies the commercial building as the principal place of business of the owner.	
	Commercial Business Owner's Consent: I, as the owner of the commercial business, have no objection to this application and give my consent for the dog to be kept at the place of business. Name: Owner's signature Date	
Regulated Dogs only	<input type="checkbox"/> Restricted(Restricted Dogs only) <input type="checkbox"/> Dangerous Dog <input type="checkbox"/> Menacing Dog Permit number:	
Please fill out a Restricted Dog Permit		
Declaration	I apply for the registration of the dog described above and declare that the particulars are correct in every detail and that I have read the Council's terms and conditions. Applicant's signature Date	
Office Use Only		
Date received:	<input type="checkbox"/> Registration fee paid	<input type="checkbox"/> Additional information required
<input type="checkbox"/> Registration valid from << insert date >>	Date of approval:	<input type="checkbox"/> Veterinary surgeon's certificate attached if dog desexed