

Dog Registration Application

IMPORTANT NOTICE

Western Downs Regional Council is collecting personal information you supply on this form in accordance with *Animal Management (Cats and Dogs) Act 2008*. The personal information collected on this form will be used to maintain a register of animals. Your personal information will be accessed by persons who have been authorised to do so. Some of this information may be given to Department of Agriculture & Fisheries for the purpose of maintaining a state regulated dog register. Your information will not be given to any other person or agency unless required by law. Your personal information is handled in accordance with the *Information Privacy Act 2009*.

Animal Management (Cats and Dogs) Act 2008 requires that all dogs over the age of 12 weeks must be registered with Council. The dog must be registered by the OWNER of the animal.

Application type: New registration - 1 Year New registration - 3 Year **How would you like to receive your reminder:** SMS Email Mail
 Replacement tag **Note: complete owner name, postal address, address where animal is kept, animal name and sign only**



Animal Owner Details

Surname:		First Name:	
Surname:		First Name:	
Postal Address:			
Suburb:		Postcode:	
Phone (h):		Phone (w):	
Phone (m):		Fax:	
Email Address:			
Do you hold a current pensioner concession card Note: This card will need to be produced to Council to be eligible for discount		<input type="checkbox"/> Yes Number: _____	<input type="checkbox"/> No



Animal Details

Has this animal previously been registered with Western Downs Regional Council: <input type="checkbox"/> Yes <input type="checkbox"/> No																							
Address (where animal is kept):																							
Suburb:		Postcode:																					
Name:		Age:	Years _____ Months _____																				
Breed:	/	Colour:	/																				
Sex:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Microchip number:	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> <td style="width: 15px; height: 15px;"></td> </tr> </table>																				
Desexed:	<input type="checkbox"/> Yes (copy of certificate to be attached)	<input type="checkbox"/> No																					
If dog has been declared a regulated dog by any local authority (including Western Downs Regional Council) tick applicable option below <input type="checkbox"/> Dangerous <input type="checkbox"/> Menacing <input type="checkbox"/> Restricted																							



Customer Signature & Declaration

Do you give permission for your contact details (including name, address, phone number/s) to be released in the event of your cat/dog being impounded by others? (For privacy reasons, your details will not be released unless permission is given by you).	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am aware of my requirements as a responsible pet owner under Local Law and <i>Animal Management (Cats and Dogs) Act 2008</i> .	<input type="checkbox"/> Yes <input type="checkbox"/> No
I hereby apply for the registration of the dog described above and declare that the details are correct to the best of my knowledge.	
Signature of owner: _____	Date: _____ / _____ / _____



Office Use Only

Assessment number:		Fee code/Levy:	Whole / Desexed	Pensioner Y / N
Dog number:		Amount paid:	\$	
Tag number:		Date paid:	/	/
Tag expiry:	/ /	Receipt number:		
NAR:		NAR:		
Replacement Tag number:		Initials:		

