

Application to Keep Additional Dogs/Cats

Dog Act 1976 & Cat Act 2011

Application Fee - \$110 (as a September 2017)

Privacy Notice

The Shire of East Pilbara is collecting the personal information you supply on this form for the purpose of processing your application. Authorisation is provided under the *Shire of East Pilbara Dog Local Law 2011 and the Shire of East Pilbara Health Local Law 2011*. Your personal details will not be disclosed to any other person or agency external to Council.

Applicant Details:

Mr.	Mrs.	Ms.	Miss.	Surname: _____
First Name: _____		Middles Name/s: _____		
Property Address & Suburb: _____				
Postal Address:	As above	_____		
Contact Number(s): _____	Email: _____			

Property Details:

Is this property:	<input type="checkbox"/> Multi-residential property	<input type="checkbox"/> House	<input type="checkbox"/> Other: _____
<i>If you are not the owner of the property you will need written consent from the owner or manager of the premises. Refer to page 2</i>			
Is the property fully fenced?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Area of Property m ² _____
Names of each person living on the property: _____			

Animal Details: *(If you have more than two additional animals please attach specific details for each additional animal)*

Total number of animals to be kept at property: _____					
Animal 1			Animal 2		
Name:	Date of Birth:		Name:	Date of Birth:	
Breed:	Colour:		Breed:	Colour:	
Gender: <input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female		Gender: <input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	
Desexed: <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Desexed: <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Microchip No:			Microchip No:		
Registration No:			Registration No:		
Animal 3			Animal 4		
Name:	Date of Birth:		Name:	Date of Birth:	
Breed:	Colour:		Breed:	Colour:	
Gender: <input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female		Gender: <input checked="" type="checkbox"/> Male	<input type="checkbox"/> Female	
Desexed: <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Desexed: <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Microchip No:			Microchip No:		
Registration No:			Registration No:		

Property Owner's Consent:

Is the applicant the owner of the above mentioned property?

Yes

No *(if no, please seek consent from property owner)*

I provide permission to the applicant, to keep _____ *(number of animals)* of _____
(animal type) on the property identified on page one.

Owner's Name(s): _____

Surname: _____

Postal Address: _____ Contact Number: _____

Signature: _____ Date: _____ Email: _____

Before submitting an application make sure you have completed all following listed items below checklist:

Y N/A

		Obtain and attach the property owner's written consent, if applicable
		Obtain and attach the written consent of the manager or body corporate of the premises <i>(if a multi-residential dwelling) if applicable</i>
		List all names of people residing at the premises.
		Current registration of each animal attached to application

Declaration:

The applicant must be the responsible person for the animal/s.

I submit this application to Council with the relevant fee and supporting documentation as required.

I understand that it is an offence to provide false or misleading information or documents. If the application is made by a corporation or incorporated association, the person signing the form must occupy a position that is legally entitled to make an application on behalf of the corporation or incorporated association.

I declare that the information supplied on this application is complete, truthful and correct in every detail.

Signature of Applicant: _____ Date: _____

Name of Applicant: _____ Contact number: _____
(Individual, Partnership, Company)

Name of Signatory: _____ Position of Signatory: _____
(If Partnership or Company) *(If Partnership or Company)*

Payment Options:

IN PERSON – You can pay at the Shire East Pilbara's Administration Office, Newman, and Marble Bar

TELEPHONE – Call (08) 9175 8000 between 830am and 4:30pm Monday to Friday to pay with MasterCard or Visa.

MAIL – Make your cheques/money order payable to 'Shire of East Pilbara' and send to PMB 22, Newman, WA 6753.

CREDIT CARD – Council complies with the Payment Card Industry Data Security Standard. Compliance helps to alleviate sensitive data being compromised and protects cardholder data. **Credit Card Numbers are NOT to be recorded on this form – Customer Service staff will contact you regarding payment once this form is received.**

Office Use Only:

Date: _____ CSO: _____ Application Checked: _____

Amount: \$ _____ Receipt No: _____ Application No: _____