

Kowanyama Aboriginal Shire Council Animal Registration Form



Application type:	<input type="checkbox"/> New Registration	<input type="checkbox"/> Renew Registration
	<input type="checkbox"/> Change of Details	<input type="checkbox"/> Replacement Tag

OWNER DETAILS (Please nominate only one animal owner, who must be over 18 years of age)	
Owners name:	_____
Address:	_____ _____ _____
Telephone:	_____
Email:	_____

Animal type:	<input type="checkbox"/> Dog	<input type="checkbox"/> Cat
Animal's name:	_____	
Date of birth:	_____	
Sex:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Is the animal desexed:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Breed of animal:	_____	
Colour of animal:	_____	
Distinguishing marks or features:	_____	
Is the animal microchipped:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what is the microchip number:	_____	
Has the animal been declared:	<input type="checkbox"/> Dangerous	<input type="checkbox"/> Menacing
	<input type="checkbox"/> Restricted	<input type="checkbox"/> None of These

ANIMAL DETAILS	
<input type="checkbox"/> Dog	<input type="checkbox"/> Cat
Animal's Name: _____	Date of Birth: _____
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Desexed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Breed: _____	Colour: _____
Distinguishing features or marks: _____	
Prescribed Permanent Identification Device (PPID)/ Microchipped: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the PPID / Microchip Number (if known): _____	
DOGS: Declared: <input type="checkbox"/> Dangerous <input type="checkbox"/> Menacing <input type="checkbox"/> Restricted <input type="checkbox"/> None of These	
<i>If you are registering more than one animal, please see over page.</i>	

DECLARATION
I apply for the registration of the animal described above (and overleaf if applicable) and declare that the particulars are correct in every detail, and that I have read and agree to the Council's Terms and Conditions on the reverse of this application.
Applicant Signature: _____ Date: _____

Terms and Conditions:

A free collar and tag will be issued with initial registration. Owners will be charged a fee for any replacement collars or tags.

- I hereby apply for registration of the animal(s) described and declare that the details are correct to the best of my knowledge.
- I recognise that failure to comply with the Kowanyama Aboriginal Shire Council’s Local Laws or the Animal Management (Cats and Dogs) Act 2008 may result in the Council taking action against myself.
- I have provided a sufficient enclosure to contain my animal in accordance with the Kowanyama Aboriginal Shire Council’s Local Laws. Keeping dog(s) on a lead or runners is not considered a sufficient enclosure. I understand that failure to keep my animals within the enclosure could result in action being taken against myself.
- I acknowledge my dog(s) must be walked on a chain, cord, or leash by a person who is physically able to control the animal.
- I understand that my dogs must wear the registration tag at all times. Should the tag become lost and/or damaged, I must contact Kowanyama Aboriginal Shire Council for a replacement tag.

Please Note:

- Payment of the relevant fees must be received by Council before new applications for registration can be processed.
- Under the Animal Management (Cats and Dogs) Act 2008, if you own an American Pitbull or pit bull terrier, a Dogo Argentino, a Fila Brasileiro, a Japanese Tosa, or a Perro de Presa Canario or Presa Canario, you must apply to Council for a permit to keep a Restricted Dog.

Registration Fees:

Please note that the registration period is for 12months

Desexed Dog / Cat – per animal	\$	14.00
Non-Desexed Dog / Cat – per animal	\$	28.00
External Contractor Dog / Cat – per animal	\$	332.50
Declared Dangerous Dog – per animal	\$	199.50

Kowanyama Aboriginal Shire Council – Information Privacy Statement

Your personal information has been collected for the purpose of assessing your application for new/renewal/change of details for a dog or cat registration in accordance with the Animal Management (Cats and Dogs) Act 2008 – Section 46, 47, 54, and 55. You are providing personal information which will be used for the purpose of delivering services and carrying out council business. Your personal information is handled in accordance with the Information Privacy Act 2009 and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission, or the disclosure is required by law.

OFFICE USE ONLY	
Receipt Number: _____	Date: _____
Amount Received: _____	Received By: _____
Tag Number Issued: _____	

Please complete the following for any additional animals.

ANIMAL DETAILS	
<input type="checkbox"/> Dog	<input type="checkbox"/> Cat
Animal's Name: _____	Date of Birth: _____
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Desexed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Breed: _____	Colour: _____
Distinguishing features or marks: _____	
Prescribed Permanent Identification Device (PPID)/ Microchipped: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the PPID / Microchip Number (if known): _____	
DOGS: Declared: <input type="checkbox"/> Dangerous <input type="checkbox"/> Menacing <input type="checkbox"/> Restricted <input type="checkbox"/> None of These	

ANIMAL DETAILS	
<input type="checkbox"/> Dog	<input type="checkbox"/> Cat
Animal's Name: _____	Date of Birth: _____
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Desexed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Breed: _____	Colour: _____
Distinguishing features or marks: _____	
Prescribed Permanent Identification Device (PPID)/ Microchipped: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, what is the PPID / Microchip Number (if known): _____	
DOGS: Declared: <input type="checkbox"/> Dangerous <input type="checkbox"/> Menacing <input type="checkbox"/> Restricted <input type="checkbox"/> None of These	