





## Animal Registration Form

**Information Privacy Act 2009** Burdekin Shire Council is collecting your personal information in accordance with the Animal Management (Cats & Dogs) Act 2008. This information will only be used by authorised Council Officers and any applicable State Government Departments for the purpose of maintaining a register of animals, investigating alleged incidents, gathering statistics or general information and also ensuring our records are accurate. Your information will not be given to any other person or agency unless you have given us permission or we are required by law to do so.

I, ..... hereby apply to register the dog or cat described below, which is kept within the Burdekin Shire. I certify that all aspects of the description are true.

<b>Application for:</b> <i>(tick ✓ applicable)</i>	<input type="checkbox"/>  <b>DOG</b>	<input type="checkbox"/>  <b>CAT</b>
<b>Date Registered:</b>	/ /	<b>Receipt No:</b>
<b>Tag Number:</b>		<b>Animal Number:</b>
<b>REGISTRATION PERIOD</b>	2011/2012	<b>Fee:</b> \$
<b>OWNER/S DETAILS</b>	Full Name/s:	
	Postal Address:	
	Contact Details:	Home:                      Work:                      Mobile:
		Email Address:
	Pensioner Concession	YES      NO      No:
<b>ANIMAL DETAILS</b>	<b>PLEASE LIST THE MOST DOMINANT BREED – THEN ‘CROSS’ IF SECOND BREED IS UNKNOWN (E.g. STAFFY X)</b>	
	Breed:	
	Animal's Name:	
	Age or Date of Birth:	
	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
	Desexed:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cert Sighted    or <input type="checkbox"/> Stat. Dec attached
	2 Dominant Colours:	
	Other distinguishing marks/features:	
Permanent Identification Number (PID)/microchip no.:	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Permanent Identification Number (PID) / Microchip: 	
<b>PROPERTY DETAILS</b>	Address Where Animal is Kept : <i>(residential address)</i>	
	Property Fenced:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Residence Type:	<input type="checkbox"/> House <input type="checkbox"/> Flat/Unit (permit required) <input type="checkbox"/> Rural/Farm <input type="checkbox"/> Other
	Total number of each animal <b>already</b> registered at this address:	<input type="checkbox"/> Dogs <input type="checkbox"/> Cats
<b>REGULATED DOGS ONLY</b>	<input type="checkbox"/> Restricted Dog <input type="checkbox"/> Dangerous Dog <input type="checkbox"/> Menacing Dog	
	Permit No.: ..... <i>(Restricted Dogs Only)</i>	
<b>Customer's Signature:</b>	<b>ENTERED(CSC Officer):</b>	
	Date:        /        /	