

ANIMAL REGISTRATION APPLICATION FORM

My Pet. My Responsibility. My Maranoa.



Application Type	<input type="checkbox"/> New Registration Dog/Cat	<input type="checkbox"/> Guide/Assistance Dog	<input type="checkbox"/> Dangerous Dog			
	<input type="checkbox"/> Excess Dog Application	<input type="checkbox"/> Non-designated Town Area	<input type="checkbox"/> Menacing Dog			
	<input type="checkbox"/> Change of Ownership	<input type="checkbox"/> Registration Cancellation	<input type="checkbox"/> Restricted Animal			
Note: Any change of ownership must have New & Old Owners information, signatures and address to process.						
New Application Details	Owners Name (Applicant must be 18 years of age)	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms				
	Date of Birth					
	Residential Address	State		Postcode		
		Postal Address				
	Animal Kept at Address					
	Telephone (Home)		Work			
	Mobile					
	Email					
Pension Entitlement	<input type="checkbox"/> Yes (copy attached)	<input type="checkbox"/> No	CRN			
Animal Details	Animal Name	Breed	Colour/Markings	M/F	De-Sexed	Date of Birth
	TAG NO. <input type="text"/>	1.				
	TAG NO. <input type="text"/>	2.				
	TAG NO. <input type="text"/>	3.				
	TAG NO. <input type="text"/>	4.				
		Excess Application Required - Dog				
		Excess Application Required - Dog				
		Animal Number 1	Microchip No.		Animal No.	
		Animal Number 2	Microchip No.		Animal No.	
		Excess Dog 3	Microchip No.		Animal No.	
	Excess Dog 4	Microchip No.		Animal No.		
CUSTOMER SIGNATURE & DECLARATION						
I give permission for my contact details (name, address, phone number/s) to be released in the event my dog(s) or cat(s) has been impounded by other agencies? (For privacy reasons, your details will not be released unless permission is given by you).						
<input type="checkbox"/> Yes <input type="checkbox"/> No						
I hereby apply for the registration of the dog(s) or cat(s) described above and declare that the particulars are correct in every detail and I have read and understand Maranoa Regional Council's relevant terms and conditions.						
Persons claiming a Pensioner discount please show proof of entitlement.						
All de-sexed animal owners <u>MUST</u> produce a certificate from your veterinarian as evidence.						
Signature _____			Date _____			
Processing (Office Use Only)						
<input type="checkbox"/> Pension entitlement provided/sighted			<input type="checkbox"/> De-sexed certificate provided			
Receipt Number:				Assessment Number:		
TRIM Reference:				NAR Number:		
Processing Staff Member:				Date:		
<input type="checkbox"/> Action <input type="checkbox"/> FYI Notes:						

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Change of Ownership Previous Owner Details	Owners Name (Applicant must be 18 years of age)	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms		Date of Birth	
	Residential Address				
		State		Post code	
	Postal Address				
	Animal Kept at Address				
	Animal Name/Number				
	Telephone (Home)		Work		
Mobile		Email			

CUSTOMER SIGNATURE & DECLARATION

I hereby confirm that I no longer have ownership of the above stated dog(s) or cat(s) and the new owner's details are correct in every detail.
I have read and understand Maranoa Regional Council's relevant terms and conditions.

Signature _____ **Date** _____

Registration Cancellation	Owners Name (Applicant must be 18 years of age)				
	Animal Kept at Address				
	Telephone (Home & Mobile)				
	<input type="checkbox"/> No longer in my possession <input type="checkbox"/> Deceased <input type="checkbox"/> Other (specify) _____	Animal Name	_____	Animal Number	_____
	<input type="checkbox"/> No longer in my possession <input type="checkbox"/> Deceased <input type="checkbox"/> Other (specify) _____	Animal Name	_____	Animal Number	_____

CUSTOMER SIGNATURE & DECLARATION

I hereby confirm that I no longer have ownership of and supply the reason for above stated dog(s) or cat(s). I request for Maranoa Regional Council to cancel my animal registration.
I have read and understand Maranoa Regional Council's relevant terms and conditions.

Signature _____ **Date** _____

It is a requirement under the Animal Management (Cats and Dogs) Act 2008 and Maranoa Regional Council Local Law No 2 (Animal Management) that all dogs and cats over 12 weeks of age are to be microchipped and registered.

Processing (Office Use Only)			
<input type="checkbox"/> Pension entitlement provided/sighted		<input type="checkbox"/> De-sexed certificate provided	
Receipt Number:		Assessment Number:	
TRIM Reference:		NAR Number:	
Processing Staff Member:		Date:	
<input type="checkbox"/> Action <input type="checkbox"/> FYI Notes:			