



## SHIRE OF WANDERING

Address: 22 Watts St Wandering WA 6308

Telephone: 08 6828 1800

Email: reception@wandering.wa.gov.au

# REGISTRATION

ABN 27 552 059 809

## Application Form to Register a Dog

*Dog Act 1976 - Schedule 1 - Form 4*

### PART A - Owner Details

Dog owner's full name:

Residential address:

Postal address:

Email address:

DOB:

Phone:

Mobile:

Work:

#### Owner's delegate contact details (optional)

Contact Name:

Postal address:

Email address:

DOB:

Phone:

Mobile:

Work:

### PART B - Dog Details

Address where dog is normally kept:

Number of dogs to be located at these premises:

*(maximum two, unless on rural land of 10 hectares or more where the maximum is four dogs)*

Will the dog/s be effectively confined in or at the premises identified above?

☐ Yes

☐ No

Dog's name:

Sex:

Age:

Colour:

Distinguishing features or marks:

Breed:

Microchip No:

Is the dog sterilised?

☐ Yes

☐ No

Is the dog a pit bull terrier, an American pit bull terrier or a mix of one or both of those breeds?

☐ Yes

☐ No

☐ Unknown

Is the dog kept, or to be kept as a commercial security dog?

☐ Yes

☐ No

Has the dog been declared a dangerous dog?\*

☐ Yes

☐ No

\*If yes, please give details:

Is the dog kept for the purposes of the Crown?

☐ Yes

☐ No

*(If yes, note that the Dog Act 1976 does not apply, section 6(4).)*

### PART C - Registration

	1 year registration		3 year registration		Lifetime registration	
	Sterilised	Unsterilised	Sterilised	Unsterilised	Sterilised	Unsterilised
Full	<input type="checkbox"/> \$20.00	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$42.50	<input type="checkbox"/> \$120.00	<input type="checkbox"/> \$100.00	<input type="checkbox"/> \$250.00
Pensioner	<input type="checkbox"/> \$10.00	<input type="checkbox"/> \$25.00	<input type="checkbox"/> \$21.25	<input type="checkbox"/> \$60.00	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$125.00

or, previous local government where dog was registered:

Registration No:

Expiry:

Are you eligible for a pensioner concession?

*(Eligible Concession Card – Pensioner Concession Card; State Concession Card; Commonwealth Seniors Health Card with a WA Seniors Card is required)*

☐ Yes

☐ No

Pension Card No:



## SHIRE OF WANDERING

Address: 22 Watts St Wandering WA 6308

Telephone: 08 9884 1056

Email: reception@wandering.wa.gov.au

Office Hours: 8:30am - 4:30pm

# REGISTRATION

ABN 27 552 059 809

### PART D - Working Dog Declaration

I declare that the dog subject to this registration is used for the purpose of droving or tending stock and therefore claim the concessional registration that applies.

Application or renewal or a period of (✓):

	1 year registration		3 year registration		Lifetime registration	
	Sterilised	Unsterilised	Sterilised	Unsterilised	Sterilised	Unsterilised
Full	<input type="checkbox"/> \$5.00	<input type="checkbox"/> \$12.50	<input type="checkbox"/> \$10.62	<input type="checkbox"/> \$30.00	<input type="checkbox"/> \$25.00	<input type="checkbox"/> \$62.50

### PART E - Previous convictions, relevant orders

Do you have any convictions for offences against the *Dog Act 1976*, *Cat Act 2011* or *Animal Welfare Act 2002* in past THREE years? ☐ Yes ☐ No

\*If yes, please give details, specifying the date of the conviction(s), nature of the offence and the legislation involved

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Are you currently banned, or have you ever been banned, from owning or keeping a dog under an order under the *Dog Act 1976* section 46A(2) either permanently or for a period specified in the order? ☐ Yes ☐ No

\*If yes, please give details of the order

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### PART F - Declaration

The local government may refuse an application if any or all of the required information is not provided within the time period specified in the legislation.

I, \_\_\_\_\_  
(person's full name or organisation/company name)

\_\_\_\_\_

Of \_\_\_\_\_  
(address)

declare that the information I have provided is true and correct. I am aware that it is an offence to provide false and misleading information.

Signature:

\_\_\_\_\_