



OFFICIAL USE: Assessment #

Old Tag

New Tag

22 Watts Street, Wandering WA 6308
 Ph. (08) 9884 1056 Fax (08) 9884 1510

Application/Information Form to Register a Dog

Dog Act 1976 - Schedule 1 - Form 4

PLEASE NOTE - An Original Certificate of Microchip Registration or a certified copy thereof must be submitted with this form. Proof of sterilisation is required if applicable.

PART A — Owner Details

Dog owner's full name:

Residential address:

Postal address: *(if different from above)*

Age: (dd/mm/yy)...../...../..... email address: *(if available)*

(Owner must be 18 years or older)

Contact telephone number: (H).....(W).....(M).....

Owner's delegate contact details (optional)

Contact Name:

Residential address:

Postal address: *If different from above*

Age: (dd/mm/yy)...../...../..... email address: *(if available)*

(Must be 18 years or older)

Contact telephone number: (H).....(W).....(M).....

PART B — Dog Details

Address where dog is normally kept: *(if different from above)*

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:..... Age:year/s.....month/s.....

Any distinguishing features or marks?

Breed:..... Colour/s:..... Male Female

Microchip number: Is the dog sterilised? Yes No

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 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 for the purposes of the Crown? Yes No (If yes, note that the Dog Act 1976 does not apply, section 6(4).)

PART C - Public Places

- A dog shall not be in a public place unless it is-
- Held by a person who is capable of controlling the dog; or
 - Securely tethered for the temporary purpose, by means of a chain, cord, leash or harness of sufficient strength and not exceeding 2 metre.

PART D — Registration

Application or renewal or a period of (✓):

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

Working Dog

Declaration of Droving or Tending

I declare that a (Breed of dog) is used for the purpose of Droving or tending stock and therefore claim the concessional registration that applies.

1 year registration		3 year registration		Lifetime registration			
sterilised	unsterilised	sterilised	unsterilised	sterilised		unsterilised	
Full \$5.00 <input type="checkbox"/>	Full \$12.50 <input type="checkbox"/>	Full \$10.62 <input type="checkbox"/>	Full \$30.00 <input type="checkbox"/>	Full \$100.00 <input type="checkbox"/>	Pensioner \$50.00 <input type="checkbox"/>	Full \$250.00 <input type="checkbox"/>	Pensioner \$125.00 <input type="checkbox"/>

or, previous local government where dog was registered: registration #

Are you eligible for a pensioner concession Yes No (Eligible Concession Card – Pensioner Concession Card; State Concession Card; Commonwealth Seniors Health Card with a WA Seniors Card is required)

PART E — Declaration

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

I, of 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: Date: / /

Payment Options

PAYING BY POST



Shire of Wandering
22 Watts Street
Wandering WA 6308

Complete and return this form with your cheque or money order made payable to the Shire of Wandering

Please note cash will **NOT** be accepted by mail

PAYING IN PERSON



Cash, Cheque, EFTPOS, Money Order or Credit Card payments can be taken in person at;

Shire of Wandering Administration
Office 22 Watts Street
Wandering WA 6308

Office Hours: Mon – Fri 8.30am to 4.30pm

PAYING BY CREDIT CARD (Tick One Box)





Card Number: | | | |

Card Holder Name:

CCV:

Expiry Date: /

Amount: \$

Card Holder's Signature:

Date Signed: / /

PART F — Shire of Wandering Use Only

Registration approved: Yes No Assigned registration number:

Receipt Number:

Sign: