



APPLICATION FOR REGISTRATION OF DOG

Owner details (must be over 18 years of age, one owner only)

First name	Middle name	
Surname		
Residential address	Suburb	
Postal address (if different from above)		
Ph (home)	(work)	(mobile)
Email (please provide if you wish to receive renewals or other relevant information)		
Date of birth (owner must be 18 years or older)		

Dog details

Address (where dog is normally kept, if different to above)

Will the dog be effectively confined in or at the premises identified above? Yes No

No. of dogs to be located at these premises	Dog's name	Breed (if known)
Age (dd/mm/yyyy) / /	Colour	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Sterilised* <input type="checkbox"/> Yes <input type="checkbox"/> No	*Important information Proof of sterilisation, micro-chipping or concessions must be attached in support of this application. Failure to provide this information may delay or terminate the registration approval process.	
Micro-chipped* <input type="checkbox"/> Yes <input type="checkbox"/> No		
Micro-chip no.*		
Previous local government where dog was registered (if known)		
Distinguishing marks or features		
Is the dog kept as a commercial security dog? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is the dog kept for purposes of the Crown? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, the Dog Act 1976 does not apply: section 6(4).)	
Has the dog been declared dangerous? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide details:	
Is the dog a pit bull terrier, an American pit bull terrier, or mix of both? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		

Notification of new owner

New owner (first, middle and last name)

New residential address

Ph (home) (work) (mobile)

FORM 5 - CERTIFICATE OF REGISTRATION OF DOG - Dog Act 1976 s.16(6)[a]



This is to certify that

Name of dog	Breed	Colour	Age	Gender	Sterilisation status
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dog registration number		Animal number		This registration expires on	
				31/10/ _____ <input type="checkbox"/> Life of dog	
Fee paid:\$ _____					

Previous convictions

Do you have any previous convictions for offences against the *Dog Act 1976* the *Cat Act 2011*, or *Animal Welfare Act 2002* in the 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.

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.

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

Date

Fees ** Upon sighting of valid Pensioner Card.

Registration	Sterilised	S / Pensioner**	Unsterilised	U / Pensioner**	Office use only	
One year	<input type="checkbox"/> \$20	<input type="checkbox"/> \$10	<input type="checkbox"/> \$50	<input type="checkbox"/> \$25	Tag no.	
Three years	<input type="checkbox"/> \$42.50	<input type="checkbox"/> \$21.25	<input type="checkbox"/> \$120	<input type="checkbox"/> \$60	Animal no.	
Lifetime	<input type="checkbox"/> \$100	<input type="checkbox"/> \$50	<input type="checkbox"/> \$250	<input type="checkbox"/> \$125	Reg. officer	
	<input type="checkbox"/> Assistance dog			<input type="checkbox"/> Dog for droving / tending stock	Date	

Payment options

 Pay by post	Cheque or money order payable to: Town of Victoria Park, Locked Bag 437, Victoria Park WA 6979
 Pay in person	Cash, cheque, EFTPOS, money order or credit card to: Administration, Town of Victoria Park, 99 Shepperton Road, Victoria Park Cashier office hours: Monday to Friday, 8.30am - 5pm

Has been registered by

Name (person or organisation / company name)

Street address

Suburb / town

Postcode



Registration officer signature

Date