

Application for Approval to Keep an Additional Cat or Dog; or Request for Amendment to Existing Permit to Keep an Additional Cat or Dog

Local Law No. 1 (Administration) 2011

Local Law No. 2 (Animal Management) 2011 and Animal Management (Cats and Dogs) Act 2008

IMPORTANT INFORMATION
<ul style="list-style-type: none"> • Approval is required for the keeping of <ol style="list-style-type: none"> a. 3 or more cats or dogs over the age of 3 months on any property; OR b. 2 or more cats or dogs over the age of 3 months in any residential unit (residential development comprising multiple units on a single lot), multiple dwellings, duplex, accommodation units, caravan park or retirement village. • All dogs and cats must be desexed and microchipped (unless an exemption exists, and documentation provided). • At the time of application ALL mandatory documentation must be supplied, and payment of the application fee made. • Dogs must be registered with Fraser Coast Regional Council. • Owner of a female breeding dog must have a Breeder Identification Number from the Department of Agriculture and Fisheries. Note: BIN numbers are used for the purpose of tracking offspring. Note: Dogs QLD Member Number will be accepted in lieu of a BIN number. • If a "breeder" permit is required, this must be applied for separately. • Additional animal permits are not transferable to another animal or property. <p><i>If animal is registered for the first time only in the FCRC region, they will be registered free of charge for the current registration period only.</i></p>

MANDATORY DOCUMENTS OR REQUIRED INFORMATION	
All adjoining neighbours' consent (<i>mandatory</i>)	<input type="checkbox"/> Yes
Are you the owner of the property? <i>If not, owner consent is required</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type & Number of Additional Animal/s being applied for?	Cat: _____ Dog: _____
How many animals are already kept at this address?	Cats: _____ Dogs: _____
Are You a Foster Carer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of Premises where animals will be kept?	<input type="checkbox"/> Dwelling <input type="checkbox"/> Unit/Townhouse
Do you intend to Breed the Animal/s?* <i>If yes, please also complete & apply for a breeder permit</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT DETAILS/NEW OWNER DETAILS (must be 18 years or over)		<i>Office use only – Name No:</i>	
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		
Given Name/s & Surname			
Owner DOB			
Residential Street Address			
Postal Address (if different)			
Email			
Phone	M: _____	H: _____	W: _____
Preferred method to receive correspondence <i>(including animal registration notices)</i>	<input type="checkbox"/> Email <input type="checkbox"/> Post		

ALTERNATE CONTACT DETAILS		<i>Office use only – Name No:</i>	
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		
Given Name/s & Surname			
Date of Birth (if known)			
Residential Street Address			
Email			
Phone	M: _____	H: _____	W: _____

HELP ME – I'M LOST					
Would you like Council to release your contact information if your animal is found? Only boxes marked below will be released.					
<input type="checkbox"/> Owner Name	<input type="checkbox"/> Address	<input type="checkbox"/> Home/Work Ph	<input type="checkbox"/> Mobile Phone	<input type="checkbox"/> Email	<input type="checkbox"/> Animal Name

ANIMAL DETAILS		Office use only – Animal ID:	
<i>Provide the details for each additional animal. If more than 2 animals, please complete additional form/s as required.</i>			
Animal Name		Date of Birth	
Animal Type	<input type="checkbox"/> Dog <input type="checkbox"/> Cat	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Primary Breed		Secondary Breed	
Colour		Registration Tag No. (if known)	
Microchip No.		Desexed	<input type="checkbox"/> Yes <input type="checkbox"/> No

ANIMAL DETAILS		Office use only – Animal ID:	
<i>Provide the details for each additional animal. If more than 2 animals, please complete additional form/s as required.</i>			
Animal Name		Date of Birth	
Animal Type	<input type="checkbox"/> Dog <input type="checkbox"/> Cat	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
Primary Breed		Secondary Breed	
Colour		Registration Tag No. (if known)	
Microchip No.		Desexed	<input type="checkbox"/> Yes <input type="checkbox"/> No

DELAYED DESEXING (proof required) (Relevant fee will be applied in accordance with status of dog at time of registration renewal)	
Desexing Voucher/ Letter <input type="checkbox"/> Y <input type="checkbox"/> N	Date Booked In:
Vet Surgery:	

DELAYED DESEXING (proof required) (Relevant fee will be applied in accordance with status of dog at time of registration renewal)	
Desexing Voucher/ Letter <input type="checkbox"/> Y <input type="checkbox"/> N	Date Booked In:
Vet Surgery:	

DESEXING EXEMPTION (proof required) (Relevant fee will be applied in accordance with status of dog at time of registration renewal)		
Vet Certificate/ Letter	*unable to be desexed for medical reasons	<input type="checkbox"/> Y <input type="checkbox"/> N
8Yrs or over; or <input type="checkbox"/> Y <input type="checkbox"/> N	Show Assoc. (evidence required)	<input type="checkbox"/> Y <input type="checkbox"/> N

DESEXING EXEMPTION (proof required) (Relevant fee will be applied in accordance with status of dog at time of registration renewal)		
Vet Certificate/ Letter	*unable to be desexed for medical reasons	<input type="checkbox"/> Y <input type="checkbox"/> N
8Yrs or over; or <input type="checkbox"/> Y <input type="checkbox"/> N	Show Assoc. (evidence required)	<input type="checkbox"/> Y <input type="checkbox"/> N

REGULATED ANIMAL	
Declared Dangerous <input type="checkbox"/> Y <input type="checkbox"/> N	Restricted <input type="checkbox"/> Y <input type="checkbox"/> N
Declared Menacing <input type="checkbox"/> Y <input type="checkbox"/> N	

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Declared Menacing <input type="checkbox"/> Y <input type="checkbox"/> N	

Declaration	
This section must be completed by the animal owner. Where a person is signing on behalf of the owner (the 'signatory'), they must occupy a position that is legally entitled to make that application and complete the details below. Documentation must be provided if a power of attorney (POA) signs on behalf of a person.	
I understand and verify that:	
<ul style="list-style-type: none"> I am duly authorised to make this application The statements and information provided are accurate, true and complete It is an offence to knowingly provide false or misleading information Where a concession has been applied for, I authorise the Federal Government and its agencies to divulge to Fraser Coast Regional Council so much of the information contained in my records as is necessary to determine eligibility for concessions of dog registration fees and for no other purpose. I understand that if my animal is 'whole', and I am not claiming for an exemption, I declare that I will provide a desexing certificate to Council within 28 days of registration, or fines may apply. Approval of this application does not extend to the approval of any other statutory or local government requirements relating to this premises or activity The land is suitable for the keeping of the animal/s The enclosure in which the animal/s are to be kept is structurally suitable The animal/s will not be likely to cause any undue nuisance, inconvenience, or annoyance to the occupiers of adjoining land The animal/s will not have a significant detrimental effect on the amenity of the surrounding area The animal/s will not have a significant detrimental effect on the local environment or cause pollution or other environmental damage 	
Applicant/Animal Owner Name	
Signatory Name (if applicable)	
Signature	
Date	

PROPERTY OWNERS DECLARATION (WHERE THEY ARE NOT THE APPLICANT/ANIMAL OWNER)

Section to be completed where the applicant does not own the property (where additional animals are being kept)

I / WE _____ [print name]

OF _____ [print address]

- Give Consent
 Do Not Give Consent

For an additional animal/s to be kept at the address detailed in "Residential Address Details" section on page 1 of this application.

OWNER 1 SIGNATURE: _____ DATE: _____

OWNER 2 SIGNATURE: _____ DATE: _____

*If more than 2 owners, all names and signatures must be provided

ADJOINING NEIGHBOUR/OCCUPIER DECLARATION

I / WE _____ [print name]

OF _____ [print address]

- Give Consent
 Do Not Give Consent

For an additional animal/s to be kept at the address detailed in "Residential Address Details" section on page 1 of this application.

OCCUPIER 1 SIGNATURE: _____ DATE: _____

OCCUPIER 2 SIGNATURE: _____ DATE: _____

*If more than 2 occupiers (over 18 years), all names and signatures must be provided

ADJOINING NEIGHBOUR/OCCUPIER DECLARATION

I / WE _____ [print name]

OF _____ [print address]

- Give Consent
 Do Not Give Consent

For an additional animal/s to be kept at the address detailed in "Residential Address Details" section on page 1 of this application.

OCCUPIER 1 SIGNATURE: _____ DATE: _____

OCCUPIER 2 SIGNATURE: _____ DATE: _____

*If more than 2 occupiers (over 18 years), all names and signatures must be provided

ADJOINING NEIGHBOUR/OCCUPIER DECLARATION

I / WE _____ [print name]

OF _____ [print address]

- Give Consent
 Do Not Give Consent

For an additional animal/s to be kept at the address detailed in "Residential Address Details" section on page 1 of this application.

OCCUPIER 1 SIGNATURE: _____ DATE: _____

OCCUPIER 2 SIGNATURE: _____ DATE: _____

*If more than 2 occupiers (over 18 years), all names and signatures must be provided

Office Use Only

Receipt No.		Date Created	
AD Animal Application Number 1		CSO Initials	
AD Animal Application Number 2		Owner Details Verified	<input type="checkbox"/> Yes
Mandatory Documents Attached	<input type="checkbox"/> Yes	Declaration/s Completed/Signed	<input type="checkbox"/> Yes
Public Memo completed	<input type="checkbox"/> Yes	Registration Certificate & TAG issued (newly registered animals)	<input type="checkbox"/> Yes
Desexing memo completed (where required [exemption or delayed])	<input type="checkbox"/> Yes		