



SHIRE OF DALWALLINU

APPLICATION FOR DOG REGISTRATION

Western Australia Dog Act 1976 & Dog Regulations 2013

| |
|-----------------|
| Office use only |
| Tag No |

PART A - Owner Details

| | | | |
|---------------------------------|-----------------------------------|-----|-----|
| Full Name | | | |
| Residential Address | | | |
| Postal Address | | | |
| Date of Birth (dd/mm/yy) | Owner MUST be 18 Years or older | | |
| Contact Numbers | (H) | (W) | (M) |
| Email Address | | | |
| Pensioner Number | Card must be sighted for discount | | |

Alternative Contact Details (If owner cannot be contacted)

| | | | |
|---------------------------------|---------------------------------|-----|-----|
| Full Name | | | |
| Residential Address | | | |
| Postal Address | | | |
| Date of Birth (dd/mm/yy) | Owner MUST be 18 Years or older | | |
| Contact Numbers | (H) | (W) | (M) |
| Email Address | | | |

PART B - Dog Details

| | | |
|---|-----------------|--|
| Address where dog is normally kept | | |
| Number of dogs to be located at these premises | | |
| Will the dog/s be effectively confined in or at the premises identified above? | Yes / No | |

| | DOG 1 | DOG 2 |
|--|----------|----------|
| Dog's Name | | |
| Age (dd/mm/yy) | | |
| Breed (if known) | | |
| Colour | | |
| Any distinguishing features or marks? | | |
| Gender | | |
| Microchip Number | | |
| Is the dog sterilised? | Yes / No | Yes / No |
| Certificate Attached | Yes / No | Yes / No |

| | |
|---|---------------------------|
| Is the dog/s kept, or to be kept, as a commercial security dog? | Yes / No |
| Has the dog/s been declared a dangerous dog? | Yes / No |
| If yes, please provide 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 |

PART D – Registration

Application or Renewal for

| | 1 Year | 3 Years | Lifetime |
|---|----------------------------------|-----------------------------------|-----------------------------------|
| Unsterilised | <input type="checkbox"/> \$50.00 | <input type="checkbox"/> \$120.00 | <input type="checkbox"/> \$250.00 |
| Sterilised | <input type="checkbox"/> \$20.00 | <input type="checkbox"/> \$42.50 | <input type="checkbox"/> \$100.00 |
| Concessions | | | |
| Pensioner - Unsterilised | <input type="checkbox"/> \$25.00 | <input type="checkbox"/> \$60.00 | <input type="checkbox"/> \$125.00 |
| Pensioner - Sterilised | <input type="checkbox"/> \$10.00 | <input type="checkbox"/> \$21.25 | <input type="checkbox"/> \$50.00 |
| Dog for droving or tending stock - Unsterilised | <input type="checkbox"/> \$12.50 | <input type="checkbox"/> \$30.00 | <input type="checkbox"/> \$62.50 |
| Dog for droving or tending stock - Sterilised | <input type="checkbox"/> \$5.00 | <input type="checkbox"/> \$10.65 | <input type="checkbox"/> \$25.00 |
| Guide Dog, or dog kept for the purposes of the Crown | | | <input type="checkbox"/> \$0.00 |

| | |
|--|--|
| Previous Local Government where dog was registered (if known) | |
| | |
| Registration Number (to be issued by local government) | |

PART E – Previous Convictions

Do you have any convictions for offences against the *Dog Act 1976*, *Cat Act 2011* or *Animal Welfare Act 2002* in the past 3 years? **Yes / No**

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

PART F – Declaration

The Shire of Dalwallinu may refuse an application if any or all of the required information is not provided within in 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 _____

Registration can be paid in person at the Shire of Dalwallinu using Eftpos, Cash or Cheque, or by posting a Cheque or Money Order with registration form attached. Please make cheque/Money Order payable to the Shire of Dalwallinu.

Further details required by the Shire of Dalwallinu

PART G – Local Government Use Only

- Registration approved
- Copy of Sterilisation / Exemption Certificate attached
- Copy of Pensioner Concession Card attached
- Copy of Microchip details

| |
|-------------------------|
| Tag Number _____ |
| Assessment Number _____ |
| Issuing Officer _____ |
| Date _____ |