

New Animal Registration

PRIVACY NOTICE: SOUTH BURNETT REGIONAL COUNCIL IS COLLECTING YOUR PERSONAL INFORMATION FOR THE PURPOSE OF PROCESSING THIS FORM. COUNCIL WILL RETAIN THESE DETAILS FOR THE PURPOSE OF CONTACTING YOU WITH REGARDS TO ANY COUNCIL RELATED MATTERS. YOUR PERSONAL DETAILS ARE HANDLED IN ACCORDANCE WITH THE *INFORMATION PRIVACY ACT 2009* AND WILL BE USED FOR THE PURPOSES OF RESPONDING TO YOU AND WILL NOT BE DISCLOSED TO ANY OTHER PERSON OR AGENCY EXTERNAL TO COUNCIL WITHOUT YOUR CONSENT, UNLESS REQUIRED OR AUTHORISED BY LAW.

OWNERS DETAILS (PLEASE PRINT)		<i>Applicant must be over 18 years of age.</i>	
Surname		Given Names	
Postal Address			
Suburb	State	Postcode	
Business phone	A/H phone	Mobile	
Email address		Fax	
PROPERTY ADDRESS DETAILS			
Property Address			
Suburb	State	Postcode	
Transferred from another Council? Please name Council and current Tag/Registration No.			
FIRST ANIMAL DETAILS			
Animal Name	Major Breed	Colour	Age
	Minor Breed		
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female Desexed <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach sterilization certificate)		Microchip <input type="checkbox"/> Yes <input type="checkbox"/> No Microchip No: Breeder Supply Number: (Applicable for all dogs born after 26 May 2017)	
Details of other distinguishing features/markings:			
SECOND ANIMAL DETAILS			
Animal Name	Major Breed	Colour	Age
	Minor Breed		
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female Desexed <input type="checkbox"/> Yes <input type="checkbox"/> No (Attach sterilization certificate)		Microchip <input type="checkbox"/> Yes <input type="checkbox"/> No Microchip No: Breeder Supply Number: (Applicable for all dogs born after 26 May 2017)	
Details of other distinguishing features/markings:			
DECLARATION OF APPLICANT			
I the owner, declare that the above information is correct and should any details given in relation to this application be changed in the future, the applicant shall advise South Burnett Regional Council in writing.			
Signature		Date	
Signature		Date	

OFFICE USE ONLY		
Fee paid	Receipt Date	Receipt No.
Veterinarian's Certificate Attached <small>(if dog is desexed)</small>	Animal 1 Tag No.	Animal 2 Tag No.
	Animal ID:	Animal ID: