Change of Animal Owner-Details Application



Information Privacy Act 2009. Burdekin Shire Council is collecting your personal information as required under the Animal Management (Cats and Dogs) Act 2008 and/or Local Law No. 2 (Animal Management) 2012 for the purpose of processing your application. Some of this information may be given to the Department of Infrastructure, Local Government and Planning and/or the Department of Agriculture and Fisheries for the purpose of reporting or undertaking animal management activities. Your information will not be disclosed to any other third party without your consent unless required or permitted to do so by law.

Address all communications to The Chief Executive Officer

PO Box 974, Ayr Qld 4807 T (07) 4783 9800 | F (07) 4783 9999 enquiries@burdekin.qld.gov.au

| This applicat | ion mu | st be c | omple | ted by | the p | revious a | ind curi | rent ow | ners o | of the a | nimal | prior to | submitt | ing to C | Coun | cil. |
|---|--|-----------------|--------|--------|-------|------------|-------------------|----------|---|----------|-----------|----------|----------|----------|------|------|
| Animal Details | | | | | | | | | | | | | | | | |
| Animal Name | Э | | | | | | | | Bre | eed | | | | | | |
| Animal No. | | Current Tag No. | | | | | | | | • | | | ag No. | | | |
| Colours/Mark | kings | ings | | | | | | | | • | | | /lale | | | |
| | ermanent Identification Number on or after 01/07/2010 microchipping | | | | | | | | : | *Desexed | | J 🗆 Y | Yes | | □ No | |
| | | | | | | | | | *If newly desexed attached proof (certificate etc.) | | | | | | | |
| New Own | w Owner Details (Owner must be 18 years of age or over) | | | | | | | | | | | | | | | |
| Surname | | Given Name/s | | | | | | | | | | | | | | |
| Postal Address | | | | | | | | | | | | | | | | |
| Physical Address | | | | | | | | Subu | rb | F | | | Postco | de | | |
| Home Phone No. | | | | | | | Mobil | le No. | | | | | <u>I</u> | | | |
| Email | | | | | | | | | | | | | | | | |
| *Pensioner Yes No If Yes Card No. Card Sighted By (CSO Officer Name) | | | | | | | | | | | | | | | | |
| *To be eligible for discount, holder of pension card must be the registered owner (attach copy of pension card) | | | | | | | | | | | | | | | | |
| Number of animals already kept at this address? | | | | | | | | | | Dogs | | Cats | | | | |
| Signature | | | | | | | | | | | Date | | 1 | | 1 | |
| Previous Owner Details (To be completed by the current registered owner of the Animal) | | | | | | | | | | | | | | | | |
| Surname | | | | | | | | | Given Name/s | | | | | | | |
| Address where animal was previously kept | | | | | | | | | | | | | | | | |
| Suburb | | | | | | | | | | | Post Code | | | | | |
| Home Phone No. | | | | | | | Mobile No. | | | | | | | | | |
| Email | , | | | | | | | | | | | | | | | |
| I hereby auth | orise c | wners | hip of | the ar | nimal | to be trar | nsferre | d to the | new | owner | as lis | ted abov | e. | | | |
| Signature | | | | | | | | | | Date / | | | | 1 | | |
| | Office Use Only | | | | | | | | | | | | | | | |
| Date Receive | ed | d / / | | | | N | | | | | Noted | | | | | |
| New Name N | lo. | D. F | | | | | Record Updated By | | | | | | Α | ction | | |
| New Land No | 0. | (CSO Name) | | | | | | | | | | Functio | on ID | | | |