

Balonne Shire Council

118 Victoria Street, St George
PO Box 201,
St George QLD 4487



Telephone 07 4620 8888 Facsimile 07 4620 8889
Email council@balonne.qld.gov.au
Website www.balonne.qld.gov.au

Local Government
Act 1993

Local Law No. 2
(Keeping and Control
of Animals)

Kennels / Cattery

Application for a Kennel / Cattery Licence

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Application is for

Kennel Licence Fee _____
 Cattery Licence Fee _____

Applicant/s details

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I declare the information provided in this application to be true and correct.

Signature _____ Date / /

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I declare the information provided in this application to be true and correct.

Signature _____ Date / /

Contact details

Select as applicable.

Business Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email _____

Business details

Business name must be
registered with the Office
of Fair Trading.
If applicant is a company,
insert company name and
ACN / ARBN.

Business name _____ BN

Company name _____ ACN / ARBN

Street address

Locality / Suburb

State

Postcode

Enter postal address if different from street address.	Postal address		
	Locality / Suburb		
	State	<input type="text"/>	Postcode <input type="text"/>
	Contact ph.	<input type="text"/>	Mobile <input type="text"/>
	Contact fax	<input type="text"/>	Email <input type="text"/>
Real property description – refer to Rates Notice.	Lot no.	Reg. plan no.	Parish

Owner/s consent

This is the name and address of the owner/s of the premises. If there are additional owners, please attach additional owner information to this form.	Name		
	Street address		
	Locality / Suburb		
	State	<input type="text"/>	Postcode <input type="text"/>
	Contact ph.	<input type="text"/>	Mobile <input type="text"/>
	Contact fax	<input type="text"/>	Email <input type="text"/>
I, being the owner of the property described in this application, hereby consent to the afore mentioned applicant/s making this application.			
Signature		Date <input type="text"/>	

Kennel details

Type of kennel.	<input type="checkbox"/> Breeding	<input type="checkbox"/> Racing	<input type="checkbox"/> Boarding	<input type="checkbox"/> Training
	<input type="checkbox"/> Other (specify) <input type="text"/>			
	No. of dogs	Breed/s of dogs		
	Hours of operation	<input type="text"/>	am	<input type="text"/>
	Method of keeping animals after business hours			
	<input type="text"/>			
	<input type="text"/>			

Cattery details

	Type of cattery (if applicable)			
	No. of cats	Breed/s of cats		
	Hours of operation	<input type="text"/>	am	<input type="text"/>
	Method of keeping animals after business hours			
	<input type="text"/>			
	<input type="text"/>			

Lodgement

Please attach the following:

1. Plans (scale 1:200 or 1:500), which include an indication of:
 - (i) the position of the premises in respect to the building of which it forms part and to the boundaries of the land and other structures on the land;
 - (ii) the means of ventilation;
 - (iii) the means of internal drainage from the site;
 - (iv) the arrangement or configuration of enclosures, pens, exercise yards etc; and
 - (v) the type, positioning, layout and materials comprising any equipment, fittings, chattels and finishes.
2. Evidence of town planning / building approval.
3. Evidence of any consent or approval that may be required under State or Federal legislation.
4. A copy of the additional owner/s consent (if applicable). This consent must state the applicant/s name, the premises to which the application refers, provide details regarding the owner/s consent to the application and be signed by the owner/s.

Please note: This application and fee MUST be lodged with your Council.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	
Recommendation			
		Rec. no.	
Date	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account property no.	