

# Richmond Shire Council

50 Goldring Street, Richmond  
PO Box 18,  
Richmond QLD 4822



Telephone 07 4741 3277 Facsimile 07 4741 3308  
Email [enquiries@richmond.qld.gov.au](mailto:enquiries@richmond.qld.gov.au)  
Website [www.richmond.qld.gov.au](http://www.richmond.qld.gov.au)

Local Government  
Act 1993

Local Law  
(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  /  /

Select as applicable.

#### Contact details

Business  Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email \_\_\_\_\_

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

#### Business details

Business name \_\_\_\_\_ BN

Company name \_\_\_\_\_ ACN / ARBN

Street address

Locality / Suburb

State

Postcode

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

<b>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.</b>	<b>Owner/s consent</b>		
	Name		
	Street address		
	Locality / Suburb	State <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Postcode <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	Contact ph. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Mobile <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Email _____
	Contact fax <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
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="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		

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

<b>Cattery details</b>	Type of cattery (if applicable)		
	No. of cats	Breed/s of cats	
	Hours of operation	am	pm
	Method of keeping animals after business hours		

## 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.	