



Shire of Denmark

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OFFICE HOURS: Mon – Fri 9am – 4pm

DOG REGISTRATION APPLICATION

Dog Act 1976

Form 4

OWNERS DETAILS

Title: Mr Mrs Surname: _____
 Ms Miss First Name: _____

Residential Address: _____

Postal Address: _____

Phone (w): _____ Phone (h): _____

Email: _____ Mobile: _____

Can the Shire of Denmark use this email address to issue renewal notices and other relevant information? Yes No

Date of Birth: _____ (owner must be 18 years or older)

DOG DETAILS

Address where dog is normally kept _____
(if different from above)

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	
Name of Dog:				
Age of Dog:	Years:	Months:	Years:	Months:
Sex of Dog:	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>
Breed of Dog:				
Colour of Dog:				
Any distinguishing features or marks?				
Is Dog Sterilised:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sterilisation Date:				
Microchip No:				
Microchip Database Co.				
Is the dog kept, or to be kept, as a commercial security dog?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has the dog been declared a dangerous dog?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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 <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Unknown <input type="checkbox"/>		Unknown <input type="checkbox"/>	
Is the dog kept for purposes of the Crown? (if yes, note that the Dog Act 1976 does not apply: section 6(4).)	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

NOTIFICATION OF NEW OWNERTitle: Mr Mrs Surname: _____ Ms Miss First Name: _____

Residential Address: _____

Postal Address: _____

Phone (w): _____ Phone (h): _____

Email: _____ Mobile: _____

Can the Shire of Denmark use this email address to issue renewal notices and other relevant information? Yes No

Date of Birth: _____ (owner must be 18 years or older)

DOG REGISTRATION FEES

	Sterilised			Unsterilised		
	1 Year	3 Years	Lifetime	1 Year	3 Years	Lifetime
	\$20.00	\$42.50	\$100.00	\$50.00	\$120.00	\$250.00
Pension	\$10.00	\$21.25	\$50.00	\$25.00	\$60.00	\$125.00
Working Dog	\$5.00	\$10.60	\$25.00	\$12.50	\$30.00	\$62.50
Assistance Dog	n/a	n/a	n/a	n/a	n/a	n/a

- Dog for droving or tending stock Yes No

Are you eligible for a pensioner concession? Yes No

Pension / Concession Card Number: _____

Previous local government where dog was registered (if known): _____

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

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

Are you currently banned, or have you ever been banned, from owning or keeping a dog under an order under the Dog Act 1976 section 46A(2) either permanently or for a period specified in the order? Yes No

If yes, please give details

DECLARATION

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

Office use only:Assistance Dog exemption approved by CEO: _____
(CEO's Signature)

Assessment Number: _____ Assigned Registration Number: _____

Receipt No: _____ Date: _____