Logo, company name

Description automatically generated

**CAT REGISTRATION APPLICATION FORM**

**Form 1 – Details to be provided under various provisions**

*Cat Act 2011 s. 8*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PART 1 – OWNER DETAILS** | | | | | | | | | | | | | | |
| Full Name | |  | | | | | | | | | | | | |
| Residential Address | |  | | | | | | | | | | | | |
| Postal Address | |  | | | | | | | | | | | | |
| Age (DD/MM/YY) \*Owner must 18 years or Older\* | | | | | | |  | | | | | | | |
| Mobile No. | |  | | | | | | Work No. | | | | |  | |
| Email Address | |  | | | | | | | | | | | | |
| Can the Shire of Cuballing use this email address to issue renewal? | | | | | | | | | | □ Yes □ No | | | | |
| Are you a Pensioner? | | □ Yes □ No | | | | | | | | | | | | |
| Concession Type | |  | | | | | | Card No. | | | | |  | |
| **If you are a registered Breeder, Please complete Part 3 of this Application Form** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **PART 2 – CAT DETAILS** | | | | | | | | | | | | | | |
| Address where Cat is normally kept | | | |  | | | | | | | | | | |
| No. of Cats to be located at these premises | | | | |  | | | | | | | | | |
| Cats Name |  | | | | | | | | | | | | | |
| Cats D.O.B |  | | | | | | | Age (Years or Months) | | | | | |  |
| Breed | Dominant: | | | | | | | Crossbreed: | | | | | | |
| Colour |  | | | | | | | Gender | | | | □ Male □ Female | | |
| Any distinguishing features or marks? | | | | | |  | | | | | | | | |
| Microchip No. |  | | | | | | | | | | | | | |
| Is the Cat Sterilised? | | | □ Yes □ No | | | | | | | | | | | |
| **If the Cat is not Sterilised:** Is the exemption granted by a veterinarian | | | | | | | | | | | □ Yes □ No | | | |
| **If Yes, please give details of the exemption including details of issuing veterinarian** | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| Is the custodian a member of a prescribed exempt organisation | | | | | | | | | □ Yes □ No | | | | | |
| **If Yes, please give details of the prescribed exempt organisation** | | | | | | | | | | | | | | |
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| **PART 3 – APPLICATION FOR APPROVED BREEDER (If Applicable)** | | | | | | | | | | |
| Are you a Registered Breeder? | | | |  | | | | | | |
| Breed of Cats to be Breed | | | |  | | | | | | |
| Number of Cats to be Bred | | | |  | | | | | | |
| Description of Facilities | | | |  | | | | | | |
|  | | | | | | | | | | |
| Name of Breeder Registration Organisation | | | |  | | | | | | |
| Breeder Membership/Registration Number | | | |  | | | | | | |
|  | | | | | | | | | | |
| **PART 4 – DELEGATE DETAILS (Optional)** | | | | | | | | | | |
| Delegates Full Name | |  | | | | | | | | |
| Residential Address | |  | | | | | | | | |
| Postal Address | |  | | | | | | | | |
| Age (DD/MM/YY) \*Must 18 years or Older\* | | | | |  | | | | | |
| Mobile No. |  | | | | | Telephone No. | |  | | |
|  | | | | | | | | | | |
| **PART 5 – NOTIFICATION OF NEW OWNER (If Applicable)** | | | | | | | | | | |
| New Dog Owners Name | | |  | | | | | | | |
| New Owners Residential Address | | |  | | | | | | | |
| New Owners Contact No. | | | Mobile No. Telephone No. | | | | | | | |
|  | | | | | | | | | | |
| **PART 6 – PREVIOUS CONVICTIONS, RELEVANT ORDERS** | | | | | | | | | | |
| Do you have any convictions for offences against the Dog Act 1976, Cat Act 2011, or Animal Welfare Act 2002 in the past 3 years? | | | | | | | | | □ Yes □ No | |
| **If yes, please give details, specifying the date of the conviction(s), nature of the offence and the legislation involved:** | | | | | | | | | | |
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| **PART 7 – REGISTRATION** | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | **1 Year** | **3 Years** | | | **Life** |
| **No Concession – Standard Fees** | | | | | | $20.00 | $42.50 | | | $100.00 |
| **Pensioner – 50% Concession Rate** | | | | | | $10.00 | $21.25 | | | $50.00 |
|  | | | | | | | | | | |
| **If you are claiming a pensioner concession rate, please provide your pensioner concession card when registering your dog.**  **You can pay via EFTPOS, Cash or Cheque (made payable to the Shire of Cuballing)** | | | | | | | | | | |

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| **PART 7 – DECLARATION** | | | | | |
| The Local Government may refuse an application if any or all of the required information is not provided within the time period specified in the Legislation. | | | | | |
| DECLARATION BY OWNER/AGENT | | | | | |
| 1. I, the registered owner, am 18 years of age or over | | | | | |
| 1. I am not currently banned, or have been banned from owning a Cat under the Act either permanently or for a specified period | | | | | |
|  | | | | | |
|  | I, | | | |  |
|  | *(persons full name)* | | | |  |
|  | Of | | | |  |
|  | *(address)* | | | |  |
|  |  | | | |  |
| Declare that the information I have provided is true and correct. I am aware it is an offence to provide false and misleading information | | | | | |
|  |  | | | |  |
| *Signature Date* | | | |
|  | | | | | |
| **OFFICE USE ONLY** | | | | | |
| Receiving Officer | |  | Approved |  | |
| Receipt Number | |  | Amount Paid |  | |
| Tag No. Issued | |  | Date Paid |  | |
| Proof of Microchip Copied and attached | | | □ Yes □ No | | |
| Sterilisation Certificate Copied and attached (if applicable) | | | □ Yes □ No □ N/A | | |
| Pensioner Concession Card Copied and Attached (if applicable) | | | □ Yes □ No □ N/A | | |
| Breeder Registration Documents copied and attached (is applicable) | | | □ Yes □ No □ N/A | | |