

## APPLICATION FOR REGISTRATION OF DOG

### Owner details (must be over 18 years of age)

Owner's full name (one Owner only)

Residential address

Postal address (if different from above)

Ph (home)

(work)

(mobile)

Email (please provide an email address if you wish to receive renewals or other relevant information via email)

Date of birth ((Owner must be 18 years or older) dd/mm/yyyy)

### Dog details

Address (where dog is normally kept, if different to above)

Will the dog be effectively confined in or at the premises identified above?

Yes  No

No. of dogs to be located  
at these premises

Dog's  
name

Breed  
(if known)

Age (dd/mm/yyyy)

/

/

Colour

Gender

Male  Female

Sterilised\*

Yes  No

**\*Important Information**

Micro-chipped\*

Yes  No

Proof of sterilisation, micro-chipping or concessions must be attached in support of this application. Failure to provide this information may delay or terminate the registration approval process.

Micro-chip No.\*

Previous Local Government where dog was registered (if known)

Distinguishing marks or features

Is the dog kept as a commercial security dog?  Yes  No

Is the dog kept for purposes of the Crown?  Yes  No  
(if yes, the Dog Act 1976 does not apply: section 6(4).)

Has the dog been declared dangerous?  Yes  No

If yes, please provide details:

Is the dog a pit bull terrier, an American pit bull terrier, or mix of both?

Yes  No  Unknown

### Notification of new Owner

New Owner's full name

New residential address

Ph (home)

(work)

(mobile)



## Form 5 Certificate of Registration of Dog – Dog Act 1976 s.16(6)[a]



This is to certify that

Name of Dog	Breed	Colour	Age	Gender	Sterilisation Status
				<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No
Dog Registration Number		Animal Number		This registration expires on	
				31/10/ _____ <input type="checkbox"/> Life of Dog	
Fee Paid:\$ _____					

## Previous convictions

Do you have any previous convictions for offences against the *Dog Act 1976* the *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.

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 of the Order.

## 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.

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



Date

## Fees

\*\* Upon sighting of valid Pensioner Card.

Registration	Sterilised	S / Pensioner**	Unsterilised	U / Pensioner**	Office use only
1 Year	<input type="checkbox"/> \$20	<input type="checkbox"/> \$10	<input type="checkbox"/> \$50	<input type="checkbox"/> \$25	Tag No.
3 Years	<input type="checkbox"/> \$42.50	<input type="checkbox"/> \$21.25	<input type="checkbox"/> \$120	<input type="checkbox"/> \$60	Animal No.
Lifetime	<input type="checkbox"/> \$100	<input type="checkbox"/> \$50	<input type="checkbox"/> \$250	<input type="checkbox"/> \$125	Reg. Officer
	<input type="checkbox"/> Assistance Dog		<input type="checkbox"/> Dog for droving/tending stock		Date

## Payment options

 <b>Pay by Post</b>	Cheque or Money Order payable to: Town of Victoria Park, Locked Bag 437, Victoria Park WA 6979
 <b>Pay in Person</b>	Cash, cheque, EFTPOS, Money Order or Credit Card to: Administration, Town of Victoria Park, 99 Shepperton Road, Victoria Park Cashier Office hours: Monday to Friday, 8.30am-5.00pm

## Has been registered by

Name (person or organisation/company name)

Street address

Suburb/town

Postcode



Registration Officer signature

Date

Ranger Services

tel (08) 9311 8171

fax (08) 9311 8181

99 Shepperton Road  
Victoria Park WA 6100

Locked Bag No. 437  
Victoria Park WA 6979

www.victoriapark.wa.gov.au

admin@vicpark.wa.gov.au

abn 77 284 859 739