

Office:

Date:/...../.....

Time:

Name:

Application to Keep More than Allowable Animals

Lodgement and approval of this application does not reflect Animal Registration

More than Two Cats More Than Two Dogs More Than One Animal in a Multi-Residential Premises

NOTE: Your application will not be assessed without payment and ALL sections completed

ANIMAL OWNER DETAILS				
Title:	Given Name/s:		Surname:	
Ph Home: ()	Work : ()		Mobile:	
Email:				
Residential Address:				
Postal Address:				
ALTERNATIVE CONTACT DETAILS (if approved these details will be used as an emergency contact for your animal)				
Name:			Phone:	
Address:				
ANIMAL DETAILS	Current Animal 1	Current Animal 2	Proposed Animal 3	Proposed Animal 4
Council Tag No.				
Council Animal Reference No.				
Name				
Breed				
Colour				
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
Age/DOB				
Microchip Number				
Animals born after April 2009 MUST be microchipped for permit to be approved				
Is the animal desexed?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of desexing MUST be supplied to Council				
Is your dog a declared animal?	<input type="checkbox"/> Regulated <input type="checkbox"/> Menacing Dog <input type="checkbox"/> Dangerous Dog	<input type="checkbox"/> Regulated <input type="checkbox"/> Menacing Dog <input type="checkbox"/> Dangerous Dog	<input type="checkbox"/> Regulated <input type="checkbox"/> Menacing Dog <input type="checkbox"/> Dangerous Dog	<input type="checkbox"/> Regulated <input type="checkbox"/> Menacing Dog <input type="checkbox"/> Dangerous Dog
Previous address of animal/s:				
ANIMAL ENCLOSURE DETAILS				
Animal location address				
Animal Accommodation <input type="checkbox"/> Indoors <input type="checkbox"/> Pen/Kennel <input type="checkbox"/> Other _____				
Multi-Residential Properties	Number of floors in complex?		Number of premises in complex?	
	Will animal/s have access to an outside area? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Is it a communal area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Other _____			
Fencing Requirements	Is the outside area fenced? <input type="checkbox"/> Yes <input type="checkbox"/> No		Size of fenced area (m ²):	
	Type of fence?		Height of fence?	

PROPERTY OWNERS CONSENT (Please complete if the applicant is not the owner of the property)	
Title:	Given Name/s: Surname:
Ph Home: ()	Work : () Mobile:
Residential Address:	
Postal Address:	
I being the owner/s of the property described in this application hereby consent to the above mentioned applicant making this application.	
Signature:	Date:
BODY CORPORATE CONSENT (Please complete if the premises is part of a Multi-Residential Premise)	
Body Corporate Name:	
Contact Person:	Position in Company:
Postal Address:	
Email:	Work: () Mobile:
I/We being a representative of the Body Corporate of the property described in this application hereby consent to the above mentioned applicant making this application.	
Signature:	Date:
APPLICATION CHECK LIST- Please ensure you have completed/attached the below	
Proof of de-sexing attached	YES <input type="checkbox"/> N/A <input type="checkbox"/>
Microchipping Number provided	YES <input type="checkbox"/>
Neighbours Consent Form completed, signed, and attached	YES <input type="checkbox"/>
Property owners' consent and signature received	YES <input type="checkbox"/>
Body Corporate consent and signature received	YES <input type="checkbox"/> N/A <input type="checkbox"/>
Site Plan attached showing the following Free Standing Properties <ul style="list-style-type: none"> ➤ location of residence / existing structures on property ➤ boundary of adjoining land ➤ location of any roads, gates, or grids ➤ location where food for human consumption is stored ➤ the proposed or actual location of any enclosure for the animals ➤ location of any watercourses Multi-Residential Properties <ul style="list-style-type: none"> ➤ location of residence within the complex ➤ location of existing structures within the complex ➤ boundaries of adjoining premises within the complex ➤ location of any roads, gates, or grids surrounding or within the complex ➤ location where food for human consumption is stored ➤ the proposed or actual location of any enclosure for the animals ➤ location of any watercourses 	YES <input type="checkbox"/>
Existing animal's registration current with Council	YES <input type="checkbox"/>
Declaration of Lodgement signed, dated, and included with application	YES <input type="checkbox"/>

NEIGHBOURS CONSENT - Form MUST be completed, signed, and submitted with application

MULTI-RESIDENTIAL PREMISES – you are required to have all residents that are within the complex sign below.

If required, please photocopy page

Neighbour's Name:		Neighbour's Contact Number:		
Neighbour's Address:				
Tick one of the below boxes for the keeping of _____ dogs / cats at _____ <small>Number applicant's residential address</small>				
<input type="checkbox"/> NO OBJECTION	<input type="checkbox"/> OBJECTS	<input type="checkbox"/> REFUSE TO SIGN	<input type="checkbox"/> UNAPPROACHABLE	<input type="checkbox"/> VACANT PROPERTY
Signature:		Date:		

Neighbour's Name:		Neighbour's Contact Number:		
Neighbour's Address:				
Tick one of the below boxes for the keeping of _____ dogs / cats at _____ <small>Number applicant's residential address</small>				
<input type="checkbox"/> NO OBJECTION	<input type="checkbox"/> OBJECTS	<input type="checkbox"/> REFUSE TO SIGN	<input type="checkbox"/> UNAPPROACHABLE	<input type="checkbox"/> VACANT PROPERTY
Signature:		Date:		

Neighbour's Name:		Neighbour's Contact Number:		
Neighbour's Address:				
Tick one of the below boxes for the keeping of _____ dogs / cats at _____ <small>Number applicant's residential address</small>				
<input type="checkbox"/> NO OBJECTION	<input type="checkbox"/> OBJECTS	<input type="checkbox"/> REFUSE TO SIGN	<input type="checkbox"/> UNAPPROACHABLE	<input type="checkbox"/> VACANT PROPERTY
Signature:		Date:		

Neighbour's Name:		Neighbour's Contact Number:		
Neighbour's Address:				
Tick one of the below boxes for the keeping of _____ dogs / cats at _____ <small>Number applicant's residential address</small>				
<input type="checkbox"/> NO OBJECTION	<input type="checkbox"/> OBJECTS	<input type="checkbox"/> REFUSE TO SIGN	<input type="checkbox"/> UNAPPROACHABLE	<input type="checkbox"/> VACANT PROPERTY
Signature:		Date:		

Neighbour's Name:		Neighbour's Contact Number:		
Neighbour's Address:				
Tick one of the below boxes for the keeping of _____ dogs / cats at _____ <small>Number applicant's residential address</small>				
<input type="checkbox"/> NO OBJECTION	<input type="checkbox"/> OBJECTS	<input type="checkbox"/> REFUSE TO SIGN	<input type="checkbox"/> UNAPPROACHABLE	<input type="checkbox"/> VACANT PROPERTY
Signature:		Date:		

LODGEMENT AND PAYMENT

In Person	At any Council Administration Centre during cashier hours.
Post	Cheque/Money orders payable to Gladstone Regional Council. Mail to: Gladstone Regional Council, PO Box 29, GLADSTONE QLD 4680
Credit Card	<input type="checkbox"/> Please tick this box if you wish to pay via Credit Card and a Customer Solutions Officer will call for payment over the phone prior to processing the application.

DECLARATION OF LODGEMENT

I acknowledge that submission of this application and payment does not constitute grant of approval and is subject to the following:

1. Council reserves the right to refuse or cancel the permit due to non-compliance with Council's Local Laws; and
2. The approval is not transferable and therefore the permit would become void should any animal listed in this application become deceased, is relocated to another property within the Gladstone Region, or leaves the Gladstone Regional Council area; and
3. All dogs and cats must be registered and renewed each year in accordance with the *Animal Management (Cats and Dogs) Act 2008* and/or Gladstone Regional Council *Local Law No. 2 (Animal Management) 2011*; and
4. All animals must be kept in accordance with the minimum standards prescribed in *Subordinate Local Law No. 2 (Animal Management) 2011*; and
5. The enclosure for the animals must always be maintained to prevent the animal/s from wandering at large; and
6. The owner of all animals listed in the application must comply with all relevant provisions of *Local Law No. 2 (Animal Management) 2011*; and the *Animal Management (Cats and Dogs) Act 2008*; and
7. All dogs and cats born after April 2009 MUST be implanted with a microchip to be eligible to apply for this permit; and
8. My dog is not a restricted breed (i.e. Dogo Argentino, Fila Brasileiro, Japanese Tosa or of the type commonly known as 'American Pit Bull Terrier' or 'Pit Bull Terrier') or any crossbreed thereof; and
9. I acknowledge that my personal information may be given to a third party for the purpose of reuniting my lost animal should the need arise; and
10. Any changes to mine or any of the animal's details must be made in writing to Council within 7 days of the change occurring; and
11. I hereby certify that the applicant details provided are of the owner of all the animals listed on this Application; and
12. I hereby declare that the information I have provided on this form is true and correct and agree to abide by the conditions of the permit and registration as set by Council.

Signature:

Date:

PRIVACY ACT PERSONAL INFORMATION COLLECTION NOTICE:

The Gladstone Regional Council is collecting your personal information to process your application for a permit to keep more than the allowable number of animals on your property. The information collected will be entered into Gladstone Regional Council's names and address database and may be used for any necessary Council business. The information will be only accessed by authorised council employees. Some of this information may be given to a person who finds your animal and wishes to return it to you. Your information will not be given to any other person or agency unless you have given us permission, or we are required by law.

OFFICE USE
 All sections are completed

 All attachments received

Animal Reference Numbers:

Receipt Number:

CS Officer Name: