

All dogs kept within the Litchfield municipality must be micro-chipped and registered with Council from 3 months of age in accordance with the Litchfield Council Dog Management By-laws.

| OWNER DETAILS | | | |
|--|---------|-----------|--|
| Surname | | | DOB: |
| Given names | | | |
| Phone | Mobile: | Work: | |
| Postal address | | | |
| | Suburb: | Postcode: | |
| Street address | | | |
| | Suburb: | Postcode: | |
| Address where dog/s will be kept <i>(if different from above)</i> | | | |
| | | | |
| DOG DETAILS | | | |
| Dog 1- Name | | Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Breed | | De-sexed | Yes <i>(proof required)</i> <input type="checkbox"/> No <input type="checkbox"/> |
| Age | Yrs | Mths | Colour |
| Microchip No. | | | |
| | | | |
| Dog 2 - Name | | Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Breed | | De-sexed | Yes <i>(proof required)</i> <input type="checkbox"/> No <input type="checkbox"/> |
| Age | Yrs | Mths | Colour |
| Microchip No. | | | |
| | | | |
| Dog 3 - Name | | Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Breed | | De-sexed | Yes <i>(proof required)</i> <input type="checkbox"/> No <input type="checkbox"/> |
| Age | Yrs | Mths | Colour |
| Microchip No. | | | |
| | | | |
| Dog 4 - Name | | Gender | Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Breed | | De-sexed | Yes <i>(proof required)</i> <input type="checkbox"/> No <input type="checkbox"/> |
| Age | Yrs | Mths | Colour |
| Microchip No. | | | |

Please ensure that your dog's details are kept up to date and that Council is notified of change of ownership of the dog, change of address where the dog is kept, if the dog leaves the municipality and/or if the dog is deceased.

Information relating to animal management within the Litchfield Municipality and a copy of the Litchfield Council (Dog Management) By-laws can be found on the Litchfield Council website www.litchfield.nt.gov.au.

DECLARATION

I, (print full name) _____ declare that all information stated and supplied within this application form is true and correct. I agree to comply with all requirements of the Litchfield Council (Dog Management) By-laws.

Signed: _____

Date: _____

Privacy Statement

The personal information provided on this form will be used by Litchfield Council for the purposes of fulfilling your request and undertaking associated Council functions & services. Your personal information will not be disclosed to any third party unless required or permitted by law.



REGISTRATION FEES

| REGISTRATION CATEGORY | ANNUAL | ANNUAL CONCESSION | LIFETIME | LIFETIME CONCESSION |
|--|--------|-------------------|----------|---------------------|
| Entire dog | 75.00 | | 375.00 | |
| De-sexed dog (<i>proof required</i>) | 20.00 | 10.00 | 100.00 | 50.00 |
| Registered Breeder (entire dog) | 40.00 | | 202.00 | |
| Declared Dangerous Dog | 250.00 | | | |
| Working dog/Assistance dog/Service dog | Free | | Free | |

The first year of dog registration is FREE for all applications that are received prior to the 15 December 2017

- **Annual dog registration expires on 31 August each year.** A 50% pro rata fee applies for all **new annual** dog registration applications that are received after 1 March each year.
- The **concession fee for de-sexed dogs** applies to dog owners who are in receipt of a government pension.
- The **Registered Breeder fee** applies to breeders who are members of Dogs NT and who have agreed to abide by the North Australian Canine Association Rules, Regulations and Code of Ethics.
- Owners of **working dogs** are required to complete an **application for working dog registration concession form** which is available on the council website.

Payment can be made in person at the Litchfield Council office or by completing the section below and posting the form to Litchfield Council, PO Bo 446 Humpty Doo NT 0836, or email to council@litchfield.nt.gov.au. If returning the form with payment by mail or email, please include copies of sterilisation certificate and/or pension card (if applicable). Registration cannot be processed without the supporting documentation. A registration tag for your dog/s will be sent to your postal address with a receipt for payment.

Please debit my   Name on card _____

Card number _____ Expiry ____/____

I authorise Litchfield Council to charge my credit card with the amount of \$ _____

Signature of cardholder _____ Date _____

Office Use Only

| | | | |
|------------|----|------|-------------|
| Total Paid | \$ | Date | Receipt No. |
|------------|----|------|-------------|

| | | | | |
|----------------|---|---|---|---|
| Tag Numbers | 1 | 2 | 3 | 4 |
| Animal Numbers | 1 | 2 | 3 | 4 |