

Dog Registration - Change Of Details

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Burnie City Council

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Section 78 of the Dog Control Act 2000.

Dog Name:			Current Tag No.	
NOTIFICATION OF DECEASED DOG				
Surname:				
Given Names:				
Date:				
Signature (Owner):				
CHANGE OF ADDRESS or TRANSFER OF REGISTRATION				
Existing/Former Dog Owner To Complete:				
Surname:				
Given Names:				
Phone Contact:	Home:	Mobile:	Alternate Co	ntact:
Former Address:				
Postal Address:				
[] New Address:				
[] Transfer Of Registration (tick to confirm) I hereby advise that I transfer ownership of my dog named above to the NEW owner as listed below.				
I declare the above info	ormation to be t	true in every respect to the best Section 78 of the Dog Control A	of my knowledge and	
I declare the above info Signature (existing/former owner)	ormation to be t		of my knowledge and	d belief in accordance with
Signature			of my knowledge and Act 2000.	d belief in accordance with
Signature (existing/former owner)			of my knowledge and Act 2000.	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor			of my knowledge and Act 2000.	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor Surname:			of my knowledge and Act 2000.	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names:			of my knowledge and Act 2000.	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth:	mplete:	Section 78 of the Dog Control A	of my knowledge and Act 2000. WITNESS	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth: Phone Contact:	mplete:	Section 78 of the Dog Control A	of my knowledge and Act 2000. WITNESS	d belief in accordance with
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth: Phone Contact: Postal Address: Location where dog is to be kept:	mplete: Home:	Section 78 of the Dog Control A	Alternate Co	the belief in accordance with the state of
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth: Phone Contact: Postal Address: Location where dog is to be kept: I declare the above info	mplete: Home:	Mobile true in every respect to the best	Alternate Co	the belief in accordance with the state of
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth: Phone Contact: Postal Address: Location where dog is to be kept: I declare the above info	mplete: Home:	Mobile true in every respect to the best	Alternate Co of my knowledge and Act 2000. Alternate Co of my knowledge and Act 2000.	the belief in accordance with the state of
Signature (existing/former owner) New Dog Owner To Cor Surname: Given Names: Date of Birth: Phone Contact: Postal Address: Location where dog is to be kept: I declare the above info	mplete: Home:	Mobile true in every respect to the best	Alternate Co of my knowledge and Act 2000. Alternate Co of my knowledge and Act 2000.	the belief in accordance with the state of

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