Town of Bassendean

ABN 20 347 405 108



Customer Service 35 Old Perth Road, Bassendean WA 6054 Hours: 9:00am to 4:30pm Monday to Friday

Postal Address: PO Box 87 Bassendean WA 6934

Telephone: 08 9377 8000

Email mail@bassendean.wa.gov.au
Web www.bassendean.wa.gov.au

OWNER DETAILS - please p	Do	ewal for Dog Registrat og Act 1976	ion			
Dr/Mr/Mrs/Miss/Ms:	· · · · · ·					
Residential Address:	SURNAME	FIRST NAME				
Suburb:						
			(owner must be 18 years or older)			
Postal Address:(if different from above) Telephone (Home):			oile):			
Email:(if available)						
(Can your local government use this	email address to issue	renewal notices and other relev	ant information? Y / N)			
Owner's Delegate Contact Detai	<u>ls</u> (optional):					
Name of Alternative:			D.O.B:/ / (must be 18 years or older)			
Residential Address:						
Postal Address:			ile):			
writing. Dogs three months and ov current registration tag on Failure to comp	rer must be registered ar their collar. Ily with these requireme		og must be notified to Council in ot as per <i>Dog Act 1976</i>) and wear their of an infringement			
ANIMAL DETAILS - please p						
 Address where dog is ord (if different to above) 	inarily kept:					
 Number of dogs to be loc Please note the Town of Bassende is approved. 	•		permit or up to 3 dogs if a permit application			
 Will the dog be effectively confined in or at the premises identified above? Y / N 						
Name of Dog	Sex Sterilised / Y*/N	Age Breed of Dog	Colour			
Distinguishing Features:						
* If Yes to Sterilisation – Proof m * If No to Microchip - Is the exem			isation Certificate or Statutory Declaration)			

- Is the dog to be kept as a Commercial Security Dog? Y / N
- Has the dog been declared a Dangerous Dog? \mathbf{Y}^* / \mathbf{N} (*if Yes details must be provided)
- Is the dog a pit bull terrier, American pit bull terrier or a mix of one or both of those breeds? Y / N / Unknown
- Is the dog kept for the purposes of the Crown? Y / N (If yes, note that the Dog Act 1976 does not apply: section 6(4).)

Notification of New (Owner: (only o	complete this sect	ion if there is a cha	ange in owners	ship)	
New dog owner's nan	ne:					
New dog owner's resi	dential addre	ss:				
New owner's contact	numbers:					
Hm)	(V	Vk)		_(Mob)		
REGISTRATION	DETAILS -	- please print clea	arly			
Г	Sta	andard Fees pe	er dog	Concession Fees per dog		
	1 Year	3 Years	Lifetime	1 Year	•	Lifetime
Unsterilised Dog	\$50.00	\$120.00	\$250	\$25.00	\$60	\$125
Sterilised Dog	\$20.00	\$42.50	\$100	\$10.00	\$21.25	\$50
Dangerous Dog	\$50.00					
Please circle if appr	opriate: A	ssistance Dog	Dog for d	roving/tendir	ng stock	
revious local dove	rnment who	re the dog was	registered (if kr	oomu).		
•		•	,	,		
revious registration	on number (if	known):				
re you eligible for a	Pensioner Co	ncession? Y/N	N			
ensioner Concessio	n Card Numb	er:		Tv	pe:	
						_
ame as appears on	card:					
					ligible Pensioner Concession	on Card (as defined
the Rates and Charges	(Rebales and De	elerments) Act 1992) in the name of the t	Jwher of the do	ng to be registered.	
	provided specifyined, or have ya6A(2) eithei	you ever been b r permanently or	eanned, from owr r for a period spe	ning or keepii	ation involved on a separateing a dog under an ordorder? Y* / N	
ECLARATION – he local government ithin the time perio	nt may refus	e an applicatio		f the require	ed information is not	t provided
Printed Name o	f Owner/Agent	, OT	Idress of Owner/Ac	gent		,
ake application for						
ii) the pa	articulars sh	n years of age own in this app		e and corre	ct to the best of my	knowledge
	pelief; and aware that it	is an offence t	o provide false	and mislea	ding information.	
ate:						
atc			Signed: _	Signatu	ure of Owner/Agent	
	Ro	eceipt Number	Signed: _	I	re of Owner/Agent New Registration	on Number
Office use only –			:			on Number

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Dog Act 1976 Dog Registration Important Information to be retained by the owner

Important Information

- All dogs 3 months and over must be registered. The owner of an unregistered dog that is over the age of 3 months is guilty of an offence and is liable for infringement or prosecution.
- All dogs 3 months and over must be microchipped. The owner of a dog that is over the age of 3 months is guilty of an offence and is liable for infringement or prosecution.
- Control in Public: Section 31 Dog Act 1976. A dog shall not be in a public place unless it is:
 - Held by a person who is capable of controlling the dog: or
 - Securely tethered for a temporary purpose by means of a chain, cord, leash or harness of sufficient strength and not exceeding two metres.
- Dangerous Dogs for further information please contact Customer Service 9377 8000
- Fencing: Section 16 *Dog Act 1976.* The owner shall provide means on the premises for effectively confining the dog within the premises.
- Ownership: Section 16 (1b) *Dog Act 1976* Where a dog is ordinarily kept by a person under the age of 18 years, application for registration of that dog shall be made by the parent or guardian or some other person who is over the age of 18 years and any registration shall be in the name of the applicant.
- Owner name and address changes must be provided in writing to the Town of Bassendean.
- Registration period is to 31st October each year
- You can check your microchip details and database company here www.petaddress.com.au

Ways to Pay Your Dog Registration



In Person

Customer Service Centre 35 Old Perth Road Bassendean between the hours of 8.30am and 5.00pm Monday to Friday. Please present the signed Dog Registration Application with payment.



By Mail

Post a cheque together with the signed Dog Registration Application to PO Box 87 Bassendean WA 6934. On receipt of payment the dog registration tag will be forwarded to the owner's address on record.



By Credit Card

Complete the credit payment section below and send the signed Dog Registration Application to PO Box 87 Bassendean WA 6934. On receipt of payment the dog registration tag will be forwarded to the owner's address on record.

Payment by Credit Card					
	etails below and return with the signed Dog Registration Application to: endean, PO Box 87, Bassendean, WA 6934				
CARDHOLDER	S NAME:				
PLEASE INDIC	ATE: MASTERCARD				
CARD NUMBER					
EXPIRY DATE:					
AMOUNT: \$	SIGNATURE:				