

Application for a Certificate of Cat Registration

Cat Act 2011 Western Australia Form 1 s.8

Owner Details

Cat Owner's Full Name: _____

Address: _____

Postal Address: _____

Date of Birth: ____/____/____

Telephone: Ph: _____ Mob: _____

Email: _____

Can the Shire of Dowerin use this email address to issue renewal notices and other relevant information? **Yes/No**

Cat Details

Number of cats to be located at these premises: _____

Cat's Name: _____

Cat Age: _____ Year _____ Months

Breed: _____

Colour: _____

Gender: Male/Female

Microchip Number: _____

Cat Sterilised: Yes/No Certificate Sighted: Yes/No

Restricted Breed: Yes/No

Distinguishing Marks: Yes/No _____



Registration

Registration for –

- | | | | |
|-------------------------|--------------------------|------------------------|----------------------|
| a period of 1 year: | <input type="checkbox"/> | Unsterilised: \$50.00 | Sterilised: \$20.00 |
| a period of 3 years: | <input type="checkbox"/> | Unsterilised: \$120.00 | Sterilised: \$42.50 |
| a period of a lifetime: | <input type="checkbox"/> | Unsterilised: \$250.00 | Sterilised: \$100.00 |

Note: 50% discount for pensioner concession
75% discount for registrations after 31 May

Previous local government where cat was registered: _____

Registration Tag Number: 20 _ _ _ _ _

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, _____

of _____

the owner of the cat, particulars of which are listed in this application or as the duly authorised agent of the owner, declare that –

- (a) I am / the owner is not under 18 years of age; and
- (b) the particulars shown in this application are true to the best of my knowledge and belief; and I certify that means exist on the premises at which the cat will ordinarily be kept for effectively confining the cat within those premises.

I am aware that it is an offence to provide false and misleading information.

Signature: _____

Dated this _____ day of _____ 20____

Payment Options:

CASH/EFT/CHQ

Concession Number: _____ Expiry Date: / / _____

Local Government use only

Registration approved: Officer: _____

- Assigned registration number: _____