

Excess Animals Permit Application Form

Please use **BLOCK LETTERS** to complete the application and tick boxes where applicable. Enter "N/A" if the question does not apply.

Please Note: This application form and its applicable fee must be lodged at Lockyer Valley Regional Council.

Applicant/s Details

Title	Surname	Given Names	
Title	Surname	Given Names	
Postal Address			
Suburb		State	Postcode
Home Phone	Work Phone	Mobile	
Fax	Email Address		
Address where animals kept (if different from above)			
Suburb		State	Postcode

Application Type

Excess Animal Permit Application (please select all applicable boxes)

Dogs

Cats

Other

Note: If permit is approved, the Initial Permit Fee must be paid, with the Permit Expiry being 30 September each year.

Refer to Council's website for the current Fees and Charges

Application Checklist

- Completed and Signed Application Form
- Payment of Application Fee

All of the following must be provided at time of lodging application

- Letters of no objection from all occupiers of adjoining properties to the land where the animals are to be kept
- Sketch diagram of property showing layout as to where the animals are to be kept
- Photos of all Animals to be kept on property if permit is approved
- Proof of current registration for allowable dogs (if applicable)
- Completed Dog Registration Forms for Excess Dogs as per application (if applicable)

Note: Should all required documents not be provided at time of lodgement, this application will not be accepted by Council.

Note: After this application is received by Council, an inspection of the property where the animals are to be kept will be arranged by a Council officer with the applicant on this form.

Details of all Animals to be Kept

If more room is required, please attach information to this form.

Type/s of Animal/s, eg. Dog/Horse

Number of each type of Animal

	Animal Type	Breed	Sex	Description (including microchip number if applicable)	Name
Example	Dog	Maltese Terrier Cross	M	White & tan, desexed, 1 blue eye, Chip No. 900300454321100	Sammy

Signature of Applicant/s

I/We certify that the above information and the information on any attachments, to the best of my knowledge, is true and correct and that all information required on the application checklist is included in this application.

Print Name

Signature

Date

(Individual or Corporation/Incorporated Association)

Signature

Date

(Second Individual, if applicable)

Privacy Statement

These details will only be used for the purpose for which they have been collected and will not be used for any other purpose. We will not disclose the information you provide outside of Council unless we are required by law or you have given your consent. To the fullest extent allowed by law, Council, its officers and employees will not be liable for any claims in respect of any loss arising out of, or in connection with, the use of any of the supplied information.