

Mailing Address: PO Box 390, Gayndah Qld 4625 Street Address: 34-36 Capper Street, Gayndah Qld 4625

Telephone: 1300 696 272 Facsimile: (07) 4161 1425

admin@northburnett.qld.gov.au Email: northburnett.qld.gov.au Web:

ABN: 23 439 388 197

## Application for Working Dog Tag Animal Management (Cats & Dogs) Act 2008.

## IMPORTANT INFORMATION

- ✓ This form is only to be used to record required information only
- ✓ Tag fee only
- ✓ Working Dogs are exempt from Microchipping

Applicants Details								
Owner ID: New I	□ Existing □							
Given Names:								
Surname:								
Postal Address:								
Town:		State:		Postcode:				
Home Phone:		Mobile:		Work Phone:				
Property Address Details (where working dog will be kept)								
Property Address:								
Town: State:				Postcode:				
How many dogs are / will be kept on this property One ☐ Two ☐ (excess dog permit may apply)?								
Animal Details 1								
Name:			Breed:					
Sex: Male ☐ Female ☐		Age:		Colour:				
Any other noticeable, distinguishing features or marks:								
Microchipped: Yes ☐ No ☐	Microchip Number:							
Animal Details 2								
Name:			Breed:					
Sex: Male ☐ Female ☐		Age:		Colour:				
Any other noticeable, distinguishing features or marks:								
Microchipped: Yes ☐ No ☐	Microchip Number:							
Animal Details 3								
Name:			Breed:					
Sex: Male ☐ Female ☐ Age:				Colour:				
Any other noticeable, distinguishing features or marks:								
Microchipped: Yes □ No □	Microchip Number:							

## Information Privacy Act 2009 - Collection Notice

The Information Privacy Act 2009 governs how your information is used, collected, disclosed and stored. This information will be used for the purpose of assessing your application and will not be disclosed to any other third party without your written or verbal authorisation unless we are required to by law.

Working Dog As per the Animal Management (Cats and Dogs) Act 2008 a working dog is— (a) a dog usually kept or proposed to be kept—									
on rural land; and by an owner who is a primary producer, or a person engaged or employed by a primary producer; and primarily for the purpose of—									
droving, protecting, tending, or working, stock; or being trained in droving, protecting, tending, or working, stock.  Please provide the following documents to support your working dog application Rates notice identifying a rural property address in your name <b>and</b> information supporting you are a primary producer (e.g., ABN or PIC no.); OR A Statutory Declaration (witnessed by a JP) from your employer who is a primary producer detailing: name and breed of the dog/s which are used; employers PIC or ABN no.; property address the dogs work at; and statement detailing what your dogs are used for.  Supporting documentation provided? Yes □ No □  Working Dog Fees & Charges  Please contact Council on 1300 696 272 or present this form to any North Burnett Regional Council Customer Service Office for the most up to date fees and charges.									
Declaration of Applicant									
I, the applicant, declare that the above information is correct in all respects, at the time of lodgement of this application with the North Burnett Regional Council. Should any of the details given in relation to this application be changed in the future, the applicant shall advise Council in writing prior to any such change being implemented.									
Signature:		Date:							
Payment options									
In Person	By attending a North Burnett Regional Council Customer Service Office: Please Call 1300 696 272 for your nearest Office and opening times.								
By Mail	Cheque to be made payable to North Burnett Regional Council − Receipt required? Yes ☐ No ☐								
Phone	Payment can be made over the phone by calling 1300 696 272(Bpay or online payments not available)								
Office Use Only - Attention Customer Service Staff – Please complete below details									
Tag Number Issued:		Animal 1	Animal 2		Animal 3				
Receipt Number:									
Relevant Documents Attached: (e.g. concession card, desexing certificate)			ABN □ Rates Notic						
Customer Service Officer:				Date	/ /20				

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