

Domestic Animal Business Registration

Office Use Only			
Receipt number			
Receipt Code	197	Date	

Applicant Details			
Are you:	<input type="checkbox"/> Individual	<input type="checkbox"/> Company	
Surname*		First Name	
Street/Postal Address*			
Suburb*		Post Code*	
Phone		Mobile*	
Email*			

Domestic Animal Business Details			
Business Name*		Company Name	
ABN		ACN	
Street/Postal Address*			
Suburb*		Post Code*	
Phone		Mobile*	
Email*			

Business Type			
Please indicate the type of domestic animal business*			
<input type="checkbox"/> Animal shelter	<input type="checkbox"/> Pet shop	<input type="checkbox"/> Breeder	<input type="checkbox"/> Council pound
<input type="checkbox"/> Boarding establishment	<input type="checkbox"/> Training establishment	<input type="checkbox"/> Rearing establishment	
Please describe the type of services that your domestic animal business will be providing*			
Number of employees		Max number of animals that can be kept on the premises	
Do you have a planning permit for the business	<input type="checkbox"/> No <input type="checkbox"/> Yes (please provide town planning approval number) _____		

Veterinarian Details			
Surname*		First Name*	
Street/Postal Address*			
Suburb*		Post Code*	
Phone*		Mobile	
Email			

Animal Details

Animal Type

Animal Type 1	<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats	<input type="checkbox"/> Other (please specify) _____
Animal Type 2	<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats	<input type="checkbox"/> Other (please specify) _____
Animal Type 3	<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats	<input type="checkbox"/> Other (please specify) _____
Animal Type 4	<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats	<input type="checkbox"/> Other (please specify) _____
Animal Type 5	<input type="checkbox"/> Dogs	<input type="checkbox"/> Cats	<input type="checkbox"/> Other (please specify) _____

Premises

Size of premises (m ²)*			Total number of exercise yards*		
Exercise yard dimension	Length (m)		Width (m)		Height (m)
Total number of pens*					
Pen dimension*	Length (m)		Width (m)		Height (m)
Description of materials used for housing and yard construction					

Payment Details

Domestic Animal Business Registration Fee

Registration fee	\$536.70 GST Exempt
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Payment Options

I will pay for my animal registration:

<input type="checkbox"/> IN PERSON	Please bring your completed registration to the Surf Coast Shire Offices. You will have the option to pay by <u>cash, cheque or credit card at the counter</u> .
<input type="checkbox"/> BY CREDIT CARD OVER THE PHONE	Please submit this form by clicking on the submit button below. Council will contact you within 5 working days to organise payment over the phone.

Declaration

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge.
- This application forms a legal document and penalties exist for providing false or misleading information.

By ticking this checkbox I confirm that I have read and understood all the statements above.

Name of the person completing this application*	
Signature of the person completing this application*	
Date*	

Privacy Statement: The Surf Coast Shire considers that the responsible handling of personal information is a key aspect of democratic governance, and is strongly committed to protecting an individual's right to privacy. Council will comply with the Information Privacy Principles as set out in the Privacy and Data Protection Act, 2014. The information will not be disclosed to any other party unless Council is required to do so by law.