

Dog Registration Amendment Form



Privacy Notice: Council is collecting the personal information you supply on this form for the purpose of processing your application. Council is authorised to do this under the *Animal Management (Cats and Dogs) Act 2008*. Your personal details will not be disclosed to any other person or agency external to Council without your consent unless required or authorised by law.

This form is to be completed when amending current dog registration details. If the registration is not current please complete the Dog Registration Application Form. Please refer to the Dog Registration Factsheet for further information.

P: 07 4932 9000 | E: enquiries@rrc.qld.gov.au | W: www.rrc.qld.gov.au | PO Box 1860 Rockhampton QLD 4700 | ABN: 59 923 523 766

Existing Owner Details <i>(please provide details as shown on current registration)</i>												
Owner name:												
First	Middle							Last				
Date of birth:												
Postal address:												
Preferred contact number:						Email:						
Preferred delivery method: <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/> Collect – (Rockhampton, Gracemere, Mt Morgan)												
<i>Email is the standard form of delivery. If this method is unsuitable please select an alternative.</i>												
Amendment Details												
<input type="checkbox"/> Update dog details <i>(please complete Change to Animals Details)</i>				<input type="checkbox"/> Update existing owner details <i>(please complete Change to Existing Owner Details)</i>				<input type="checkbox"/> Change of registered owner <i>(please complete New Owner Details)</i>				
Change to Animals Details												
Dog 1												
Name:						Reference number:						-
Amendment details:												
<input type="checkbox"/> Desexed				<input type="checkbox"/> Deceased				<input type="checkbox"/> Missing/stolen				
<input type="checkbox"/> Transfer registration				<input type="checkbox"/> Relocated outside of the Rockhampton Region								
<input type="checkbox"/> Address where dog is kept:												
<input type="checkbox"/> Microchipped <i>(microchip number):</i>												
Dog 2												
Name:						Reference number:						-
Amendment details:												
<input type="checkbox"/> Desexed				<input type="checkbox"/> Deceased				<input type="checkbox"/> Missing/stolen				
<input type="checkbox"/> Transfer registration				<input type="checkbox"/> Relocated outside of the Rockhampton Region								
<input type="checkbox"/> Address where dog is kept:												
<input type="checkbox"/> Microchipped <i>(microchip number):</i>												
Change to Existing Owner Details												
Surname <i>(evidence required to be supplied at time of lodgement):</i>												
Preferred contact number:						Email:						

OFFICE USE ONLY	Date:	CSO:	Information checked: Y / N
	Amount:	Receipt number:	Application number:

Residential Address		
Street number and name:		
Suburb:	State:	Postcode:
Postal address (if different):		
New Owner Details		
New owner name:		
First	Middle	Last
Date of birth:		
Preferred contact number:	Email:	
Residential Address		
Street number and name:		
Suburb:	State:	Postcode:
Postal address (if different):		
If change of ownership, has the dog been desexed? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(if selected yes, a copy of the desexing certificate must be provided at time of lodgement)</i>		
Alternative Contact Details <i>(these details will be used if unable to contact the dog owner)</i>		
Name:	Contact number:	
Pensioner Status		
<input type="checkbox"/> I am advising of pensioner status <i>(provide details below)</i> <input type="checkbox"/> I am no longer a pensioner		
Name on card:	Card number:	
Over 65's Status <i>(a copy of your seniors card, driver's licence or birth certificate must be provided at the time of lodgement)</i>		
Name on card:	Card number:	
Refund Request <i>(please refer to the Dog Registration Factsheet for refund eligibility if requesting a refund)</i>		
Account name:	Bank name:	
BSB:	Account number:	
Supporting Documentation		
Please remember to provide the following supporting documentation when submitting this form:		
<input type="checkbox"/> Desexing certificate <i>(if unable to provide, a completed Statutory Declaration will be accepted)</i> <input type="checkbox"/> Microchip certificate <input type="checkbox"/> Evidence of change of surname <input type="checkbox"/> Police report <i>(required if stolen)</i> <input type="checkbox"/> Statutory declaration <input type="checkbox"/> Death certificate or registration tag <i>(if this is unable to be provided, a completed Statutory Declaration will be accepted)</i> <input type="checkbox"/> Seniors card, driver's licence or birth certificate		

Declaration

The applicant must be the responsible person for the dog/s.

I am aware that the number of dogs kept at the property is in accordance with the allowable number of dogs. If more than two dogs are kept at this property the Additional Animal/s Approval Application Form must accompany this form.

I submit this form with the relevant supporting documentation as required. I declare that the details are correct to the best of my ability. I understand that it is an offence under section 204 of the *Animal Management (Cats and Dogs) Act 2008* to provide false or misleading information or documents.

Name:

Signature:

Date:

Fees and Charges

For a full list of fees and charges please refer to Council's [Fees and Charges Schedule](#).

Payment Information

In person | You can pay at Council's Customer Service Centres: 232 Bolsover Street, Rockhampton; 32 Hall Street, Mount Morgan; 1 Ranger Street, Gracemere.

By phone | Customer Service staff will contact you regarding payment via credit card or debit once this form is received.

By post | Make your cheques/money order payable to 'Rockhampton Regional Council' and send to PO Box 1860, Rockhampton, Queensland, 4700.