

Application for Change of Ownership of Cat or Dog								
Application Date								
Original Owner	Full name							
Details	Residential address							
			Suburl	······		State	Postcode	
	Telephone		Suburi	<u> </u>		Otate	i ostcode	
New Owner Details	Full name							
	Residential address							
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	Telephone		Suburl)		State	Postcode	
	Email							
Animal	Name							
Details	Registration Type		☐ Cat ☐ Dog					
	Breed							
	Year of Birth/Age		Month			Year	/Age	
	Sex		☐ Male ☐ Female					
	Desexed ¹		Yes No If the cat/dog is desexed a veterinary surgeon's					
	Colour		certificate must be attached to the application.					
	Colour							
	Any other distinguishing features or marks							
	Permanent Identification Number (I			(PID) / Microchip Registration Number: ☐ Yes ☐ No				
		(PID) / Microchip						
Address	Address							
(at which	☐ As above							
the cat/dog is kept)	☐ Different (please state)							
Declaration	I hereby transfer ownership and registrations of the dog/cat described above and declare that the particulars are correct in every detail and that I have read the Council's terms and conditions.							
	Applicant's signature Date							
Office Use Only							- suites d	
Date received: Receipt No:		Receipt No:			Additional information required			
☐ Registration valid from: ☐ Date of approx		☐Date of approval	:		☐ Veterinary surgeon's certificate attached if cat/dog desexed			

The information collected on this Form will be used by Mount Isa City Council Local Laws Department in accordance with the processing or assessment of your application. Your personal details will not be disclosed for a purpose outside of Council protocol, except where required by legislation (including the Information Privacy Act 2009). This information may be stored in the Council database. The information collected will be retained as required by the Public Records Act 2002.