

OWNER DETAILS:		HOME PHONE:		
GIVEN NAMES:		MOBILE PHONE:		
SURNAME:		EMAIL:		
STREET ADDRESS:				
SUBURB:		POSTCODE:		
FROM WHAT DATE IS THIS PERMIT REQUIRED?	/ /			
WHAT LOCATION IS THIS PERMIT REQUIRED FOR:				
STREET ADDRESS:				
SUBURB:		POSTCODE:		

PLEASE NOTE AN INVOICE WILL BE GENERATED UPON RECEIPT OF THIS APPLICATION. THE APPLICATION WILL NOT BE ASSESSED UNTIL PAYMENT OF THE APPLICATION FEE OF **\$138.20** IS MADE.

WHAT TYPE OF ANIMALS YOU WISH TO KEEP?				
DOG	САТ		OTHER	
PLEASE SPECIFY:				
HOW MANY DO YOU WISH TO KEEP?		1		
	THREE	FOUR	FIVE	OTHER
PLEASE SPECIFY:				
HAVE REGISTRATION REQUIREMENT	IS (IF REQUIRED) BEE	EN COMPLETED?		
YES		NO		
ARE YOU AWARE OF THE LOCAL LA				
YES		NO		
CAN YOU MEET THESE REQUIREMEN	ITS?			
YES		NO		
HAVE YOU DISCUSSED THIS APPLIC	ATION WITH YOUR NE	GHBOURS?		
YES		NO		
Comments: (if any)				

ARE THERE ANY ASPECTS OF THIS ACTIVITY WHICH MAY IMPACT ON THE AMENITY AND SAFETY OF OTHERS?			
ARE THERE ANY SPECIAL CIRCUMSTANCES THAT YOU APPLICATION?	WOULD LIKE COUNCIL TO CONSIDER IN PROCESSING THIS		
HAVE YOU EVER BEEN REFUSED AN APPLICATION TO P	EEP ADDITIONAL ANIMALS ON YOUR LAND?		
YES	NO		
HAVE YOU INCLUDED YOUR APPLICATION FEE?			
U YES	NO, PLEASE SEND INVOICE		
(IN PERSON, MONEY ORDER OR CHEQUE)	(INTERNET PAYMENT OPTIONS AVAILABLE)		

SIGNATURE OF APPLICANT	DATE:	/	1

Manningham Council is committed to full compliance with the Privacy and Data Protection Act 1982 (Vic) and the Health Records Act 2001 (Vic). The personal information being collected on this form by Council is for the purpose of Animal Registration or any other directly related purpose. The personal information will be disclosed to State Government in accordance with the Domestic Animals Act for the purpose of enforcement it will not be disclosed to any other external third party without your consent, unless required or authorised by law. Individuals may apply to Council for access to their information under the Freedom of Information Act 1982. Individuals may obtain a copy of Council's Privacy Policy from any Council office or view it on our website at: http://www.manningham.vic.gov.au/privacy

OFFICE USE ONLY			
FEE: <u>\$138.20</u>	DATE PAID:	/	1
APPLICATION RECEIVED BY			
PRINT NAME:	SIGNED:		
DATE: / /	CRM:		
DATE: / /	CRM:		