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<i>Animal Management (Cats and Dogs) Act 2008</i> Sections 73, 82 and 83	Application for Restricted Dog Permit/Renewal Application for Restricted Dog Permit
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Application Type	<input type="checkbox"/> New Application <input type="checkbox"/> Renewal <input type="checkbox"/> Permit Number:		
Applicant Details	Full name		
	18 years of age or older	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Residential address	
	Postal address	<input type="checkbox"/> As above	
	Telephone		
	Email		
	Pensioner	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Restricted dog	Name		
	Breed or Type		
	Year of Birth/Age	Month Year /Age	
	Sex	<input type="checkbox"/> Male.. <input type="checkbox"/> Female	
	Desexed ¹	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Colour ²		
	Distinguishing features or marks	
	Permanent Identification Number (PID) / Microchip <input type="checkbox"/> Yes <input type="checkbox"/> No	Registration Number:	
<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="text-align: center;">Permanent Identification Number (PID) / Microchip</td> </tr> </table>	Permanent Identification Number (PID) / Microchip	<insert registration no.>	
Permanent Identification Number (PID) / Microchip			

¹ If the dog is 9 months or older, a veterinary surgeon's certificate must be attached to the application stating that the dog is either desexed or that desexing is not in the interest of the dog's health.

² A recent colour photo of the dog must be attached to the application.

Address (at which Restricted Dog will be kept under this permit)	Address <input type="checkbox"/> As above <input type="checkbox"/> Different (please state)	
	Structures on premises	<input type="checkbox"/> Detached House <input type="checkbox"/> Garage / Carport <input type="checkbox"/> Premises fully fenced <input type="checkbox"/> Other (please specify)
Declaration	I apply for the Restricted Dog Permit for the abovementioned restricted dog and declare that the particulars are correct in every detail Applicant's signature: Date.....	

Office Use Only		
Date received:	<input type="checkbox"/> Permit fee paid	<input type="checkbox"/> Additional information required
<input type="checkbox"/> Permit approved	Date of approval:	Permit number: