



Application for Permit to Keep a Regulated Dog (Dangerous)

Animal Management (Cats and Dogs) Act 2008;
Animal Management (Cats and Dogs) Regulation 2009.

Privacy Notice: Mackay Regional Council is collecting this information in order to process your application. Council is authorised to do this under the above-mentioned legislation. If required, council may provide your details to a collection agency that has been employed by council for the recovery of unpaid fees. In all other circumstances this information will only be disclosed to a third party with your written authorisation or as required by law.

P: 1300 622 529 | **E:** council@mackay.qld.gov.au | **F:** 07 4944 2400 | PO Box 41 Mackay QLD 4740 | **ABN:** 56 240 712 069
CS Centres: Mon-Fri, 8:30am-4:30pm | Civic Precinct, Gordon St, Mackay | 65 Broad St, Sarina | 20 Victoria St, Mirani

For your application to be assessed you must:

- Complete all relevant sections;
- Provide all supporting information referred to on this form; and
- Submit with the relevant fee.

Contact council if you have any specific enquiries regarding fees or how to complete this form. Please type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

SECTION A – APPLICANT DETAILS

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other:	D.O.B:
Family Name:	Given Name/s:
Postal Address:	
Suburb:	Post Code:
Home Phone:	Work Phone:
Mobile:	Email:
<i>If more than one applicant, please complete details for both.</i>	
Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other:	D.O.B:
Family Name:	Given Name/s:
Postal Address:	
Suburb:	Post Code:
Home Phone:	Work Phone:
Mobile:	Email:

SECTION B – ANIMAL DETAILS

Address where animal resides:	
Suburb:	Post Code:
Dog Name:	Dog Breed:
Sex: <input type="checkbox"/> M <input type="checkbox"/> F	De-sexed: <input type="checkbox"/> Yes <input type="checkbox"/> No
Permanent Identification Number / Microchip? <input type="checkbox"/> Yes <input type="checkbox"/> No	
PID/Microchip No: _____	New Tag No: _____

SECTION C – APPLICANT DECLARATION

- I declare the information provided in this application to be true and correct.

Applicant Name:

Signature:

Date:

PAYMENT OPTIONS

For a complete list of fees and charges, please refer to council's [Fees and Charges](#).

CREDIT CARD | We accept Visa or MasterCard. We do not accept American Express.

CHEQUE | Make your cheques payable to Mackay Regional Council.

CASH OR EFTPOS | You can pay at any of Council's Customer Service Centres.

OFFICE USE ONLY

Date:	Receipt number:	Amount:	Cashier:
Permit number:	<input type="checkbox"/> Additional information required	<input type="checkbox"/> Permit approved	Date approved: