

# CHANGE OF OWNERSHIP

## DECLARATION FOR DOG REGISTRATION

### CURRENT DOG OWNER/S DETAILS

#### OWNER 1

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

I confirm that I have transferred the ownership of the dog described below to the person/people described below:

I understand that making a false statement in this application, may make me liable upon conviction to a fine not exceeding \$3,000.00 (Dog Control Act 1996)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### OWNER 2

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

I confirm that I have transferred the ownership of the dog described below to the person/people described below:

I understand that making a false statement in this application, may make me liable upon conviction to a fine not exceeding \$3,000.00 (Dog Control Act 1996)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### DETAILS OF DOG

Dog name: \_\_\_\_\_ Breed: \_\_\_\_\_

Address dog will reside at if different from above: \_\_\_\_\_

Microchip Number: \_\_\_\_\_ Colour: \_\_\_\_\_

Tag No: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Sex: ☐ Male ☐ Female

Age (DOB): \_\_\_\_\_ Neutered/Spade: ☐ Yes ☐ No

Working dog under Sect 2(b)ii: ☐ Yes ☐ No Classification: ☐ Menacing ☐ Dangerous ☐ N/A

## NEW DOG OWNER/S DETAILS

### OWNER 1

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Tick to receive dog registration renewals by email ☐

**I confirm that I have transferred the ownership of the dog described below to the person/people described below:**

**I understand that making a false statement in this application, may make me liable upon conviction to a fine not exceeding \$3,000.00 (Dog Control Act 1996)**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OWNER 2

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Current address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

**I confirm that I have transferred the ownership of the dog described below to the person/people described below:**

**I understand that making a false statement in this application, may make me liable upon conviction to a fine not exceeding \$3,000.00 (Dog Control Act 1996)**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PLEASE RETURN THIS FORM TO:

Animal Education & Control, 217 Ellis Street, Frankton, Hamilton, Ph (07) 838 6632; Hamilton City Council, Garden Place Hamilton; or Post to Animal Education and Control, Private Bag 3010 Hamilton; or Email to: [dog.registration@hcc.govt.nz](mailto:dog.registration@hcc.govt.nz) or do it online at [www.hamilton.govt.nz](http://www.hamilton.govt.nz).

### OFFICE USE ONLY

NAR: \_\_\_\_\_ Officer: \_\_\_\_\_

AN: \_\_\_\_\_ Date: \_\_\_\_\_