

CHANGE OF ADDRESS DETAILS

DECLARATION FOR DOG REGISTRATION

DOG OWNER/S DETAILS

OWNER 1

First name: _____ Last name: _____ Date of birth: _____

Current address: _____

Previous address: _____

Phone: _____ Mobile: _____

Email: _____

Tick to receive dog registration renewals by email ☐

OWNER 2

First name: _____ Last name: _____ Date of birth: _____

Current address: _____

Previous address: _____

Phone: _____ Mobile: _____

Email: _____

Tick to receive dog registration renewals by email ☐

DETAILS OF DOG

Dog name: _____ Breed: _____

Microchip Number: _____ Colour: _____

Tag No: _____ Expiry Date: _____ Sex: ☐ Male ☐ Female

SIGNATURE OF APPLICANT/S

I confirm that I am the legal owner of the dog described below and that my contact details have changed as described above

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)

Owner 1 Signature: _____ Date: _____

Owner 2 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 or do it online at www.hamilton.govt.nz.

OFFICE USE ONLY

NAR: _____ Officer: _____

AN: _____ Date: _____