



RPR: \_\_\_\_\_

Mount Isa City Council Local Law No.  
2 (Animal Management) 2013 Division  
3 Section 4D

## Application for Registration of a Cat

<b>Application Type</b>	<input type="checkbox"/> New Registration	<input type="checkbox"/> Renewal of Registration	<input type="checkbox"/> Change of Registration Information
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<b>Applicant Details</b>	<b>Full Name</b>	_____		
	<b>Residential Address</b>	_____		
		<b>Suburb</b>	<b>State</b>	<b>Postcode</b>
	<b>Telephone</b>	<b>Home</b>	<b>Work</b>	
	<b>Mobile</b>	_____		
	<b>Postal Address</b>	<input type="checkbox"/> As Above		

<b>Animal Details</b>	<b>Animal Name</b>	_____	<b>Date of Birth</b>	_____																				
	<b>Sex</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female																						
	<b>Breed</b>	_____																						
	<b>Desexed</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>If yes, a veterinary surgeon's certificate must be attached</i>																						
	<b>Colour</b>	_____																						
	<b>Distinguishing Marks</b>	_____																						
	<b>Permanent Identification Number (PID) / Microchip</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No																						
		<table border="1"> <tr> <td colspan="10"><b>Permanent Identification Number (PID) / Microchip</b></td> </tr> <tr> <td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td> </tr> </table>			<b>Permanent Identification Number (PID) / Microchip</b>																			
<b>Permanent Identification Number (PID) / Microchip</b>																								
	<i>If yes, Microchipping documentation issued by Vet/Microchip Co containing m/c number must be attached</i>																							

<b>Address (at which the animal is kept)</b>	<b>Address</b>	_____
	<input type="checkbox"/> As above	
	<input type="checkbox"/> Different (please state)	_____

<b>Declaration</b>	I apply for the registration of the cat described above and declare that the particulars are correct in every detail.	
	Applicant's Signature .....	Date .....

**Office Use Only**

<p style="text-align: center; font-weight: bold; color: red; font-size: 1.2em;">RECEIVED</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center; font-weight: bold;">DATE</td> <td style="width: 50%; text-align: center; font-weight: bold;">BY</td> </tr> <tr> <td style="height: 20px;"> </td> <td style="height: 20px;"> </td> </tr> </table>	DATE	BY			<b>Code:</b> .....	<b>Tag number:</b>	<input type="checkbox"/> Pound Release
	DATE	BY					
	<b>Cost:</b> .....	.....	<input type="checkbox"/> Pound Sale				
	<b>Receipt No:</b> .....						

**NOTES:**  De-Sex Cert Attached     Microchip Cert/Number Attached     Microchip Voucher Issued # \_\_\_\_\_

Desexing & Microchip Voucher Issued (pound sale ONLY) # \_\_\_\_\_

*"Mount Isa City Council is collecting your personal information on this form in order to comply with its responsibilities and obligations as a Local Government. The information will only be accessed by authorised Council employees who have a legitimate need for the information to process applications, requests etc. Your personal information will not be given to any other person or agency unless you have given us permission to do so or we are required to do so by law".*

