

ANIMAL CHANGE OF DETAILS

DECEASED, LEFT PREMISES, DESEXED, MICROCHIPPED OR CHANGE OF OWNERSHIP WITHIN BULOKE SHIRE

BULOKE SHIRE COUNCIL	Prope	Property number:		Office Use Only Records Department		File No:		Document No:	
OWNER D	ETAILS								
Full name: Phone				Phone:			Email:		
New address:						Locality:		Postcode:	
Previous address:						Locality:		Postcode:	
Address where animal lived:						Locality:		Postcode:	
(if different from above) Postal address:						Locality:		Postcode:	
ANIMAL DETAILS									
Animal Number	Cat/ Dog	Name	M/F	Breed	Colour	Tag No	Deceased / I	Animal Status: Desexed / Left Premises / Microchip Number / Change of owner - Buloke Shire	
Proof supplied for desexing/sterilisation? Yes \ No \									
Were you the owner of these animals? Yes No No If no, what is your relationship to the owner? eg. spouse, sibling									
Change of Owner: For a change of owner within Buloke Shire Council, the new owner will need to complete an Animal Registration Form. It will be classed as a new registration and they will be required to pay the appropriate fees									
Name of new owner:					Address where animal is now housed:				
I hereby ac	cknowled	lge that this statement	s true and	d correct and I make it	t in the belief the	at a person makin	ng a false in stat	ement is liable to penalties of perjury	
Name: Signa			ture:	Date:					

We respect your privacy. We will not sell or give away your personal information, unless required by law. Occasionally, we may use your details for our own research purposes or to let you know about other council information. If you want to see your personal data, modify your details, or if you receive information from us you do not want in the future, please contact 1300 520 520.



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LODGEMENT OF FORM									
Mail: Buloke Shire Council Po Box 1, Wycheproof Vic 3527	In Person: Wycheproof - 367 Broadway, Wycheproof	Email: buloke@buloke.vic.gov.au							
OFFICE USE ONLY									
Updated in Council Wise to reflect the change of animal status (Please note: change of animal owner = left premises)									
Name:	Signature:	Date:							
Comments:									