

CAT REGISTRATION (FORM 1)



6177 Great Northern Highway
PO Box 70
BINDOON WA 6502

(08) 9576 4600

chatter@chittering.wa.gov.au
www.chittering.wa.gov.au

Office Hours
8:30am – 4:30pm
Monday to Friday

New Registration <input type="checkbox"/>	Transfer of Registration <input type="checkbox"/>
--	--

CONTACT DETAILS

Owner Details		Alternative Contact Details	
Given name(s)		Given name(s)	
Surname		Surname	
Date of Birth		Date of Birth	
Residential Address		Residential Address	
Postal Address		Postal Address	
Mobile		Mobile	
Home/Work Phone		Home/Work Phone	
Email		Email	
Can your local government use this email address to issue renewal notices and other relevant information? Yes <input type="checkbox"/> No <input type="checkbox"/>		Can your local government use this email address to issue renewal notices and other relevant information? Yes <input type="checkbox"/> No <input type="checkbox"/>	

Is the custodian a member of a prescribed exempt organisation? Yes No

Please give details of the Prescribed Exempt Organisation and attach any relevant paperwork

Are you an Approved Breeder? Yes No

If yes, please attach evidence to this registration

Do you have any convictions for offences against the Dog Act 1976, Cat Act 2011 or Animal Welfare Act 2002 in the past three (3) years? Yes No

If yes, please provide further information and attach any relevant paperwork

CAT(S) DETAILS

Address where cat(s) is normally kept	
Number of cats to be located at these premises	

CAT 1 ALL DETAILS ARE COMPULSORY

Name		Age	
Breed		Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Microchip Number		Microchip Database Company	
Colour		Distinguishing marks	
Sterilised?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If no , is the exemption granted by a veterinarian?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give details of the exemption including details of issuing veterinarian (attach any supporting documents)			

If you wish to keep more than two cats, you will need to apply to the Shire of Chittering via an *Application for Permit to Keep More than Two Cats* available on our website www.chittering.wa.gov.au.

ANIMAL REGISTRATION – CAT (CONTINUED)

CAT 2 ALL DETAILS ARE COMPULSORY

Name		Age	
Breed		Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Microchip Number		Microchip Database Company	
Colour		Distinguishing marks	
Sterilised?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If no , is the exemption granted by a veterinarian?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give details of the exemption including details of issuing veterinarian (attach any supporting documents)			

APPLICATION FOR APPROVED BREEDER

Breed of cats to be bred
Number of breeding cats to be kept at the property
Description of facilities
Membership of prescribed organisation

TRANSFER OF REGISTRATION

CAT 1	Council	Registration	Expiry
CAT 2	Council	Registration	Expiry

DECLARATION BY OWNER OR AGENT

I declare and acknowledge that:

1. The owner is aged 18 years or over.
2. The local government may refuse an application if any or all of the required information is not provided within the time period specified in the legislation.
3. The information I have provided is true and correct. I am aware that it is an offence to provide false or misleading information.
4. Any change in particulars contained in this application including the sale or death of cat must be notified to the Shire of Chittering immediately.
5. Cats 6 months and over must be registered.
6. Cat registrations expire on 31 October each year (as from 1 June each year, half the normal fee will be applicable to INITIAL ANNUAL registrations only.)

NAME	SIGNATURE	DATE

OFFICE USE ONLY

Approved Breeder Proof Provided	Cat 1 Sterilisation Proof Provided			Cat 2 Sterilisation Proof Provided			Sterilisation Exemption Proof Provided		
Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Pensioner Card(s) Provided	Card 1			Card 2					
CAT 1	Tag #			Expires 31 October 20__			Lifetime		
CAT 2	Tag #			Expires 31 October 20__			Lifetime		

FEES PAID

1 Year Renewal		3 Year Renewal		Lifetime		Approved Breeder Application	
Full	Concession	Full	Concession	Full	Concession	Annual Fee	
\$20.00	\$10.00	\$42.50	\$21.25	\$100.00	\$50.00	\$100.00 per cat	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No. of Cats:
Signature of Registration Officer					Date		

PENSIONER DISCOUNT

To be eligible for a 50% concession, pensioners must produce one of the following:

1. Pensioner Concession Card
2. WA Seniors Card
3. Commonwealth Seniors Health Card together with a Seniors Card
4. State Concession Card

If you are mailing your application, please include a photocopy of the relevant card (showing both front and back of card).

PAYMENT

Payments for complete applications can be made:

- In person at the Shire Administration Office, 6177 Great Northern Highway, Bindoon.
- By Mail, by including a cheque or money order with your registration form and ALL copies of relevant certificates, and posted to Shire of Chittering, P.O. Box 70, Bindoon W.A. 6502.
- By Credit Card using the form below or calling the office on 08 9576 4600

CREDIT CARD PAYMENTS																			
Card Type	Mastercard	<input type="checkbox"/>	Visa	<input checked="" type="checkbox"/>															
Cardholder Name																			
Card Number					-						-								
Expiry Date																			
Security Code																			
Signature																			
Amount																			