

Application for Registration of Domestic Animal Business

Domestic Animals Act 1994

Proprietor's Name: _____

Proprietor's Address: _____

The type of Business is: *(Please tick)*

| | |
|------------------------------------|--|
| Pet shop | |
| Breeding and Rearing Establishment | |
| Dog Training Establishment | |
| Animal Shelter | |
| Boarding Establishment, type: | |
| • Overnight Boarding | |
| • Home boarding | |
| • Daycare boarding | |

Trading as Business Name: _____

Address of Business: _____

Telephone: Business: _____ **Mob:** _____

Number of Animals: _____

Type of Animals: _____

I understand that if the application is approved, then upon payment of \$166.00 (inc GST), a Certificate of Registration will be issued.

Signed by Proprietor _____

Date: ____/____/____

Office use only

Inspection Date: ____/____/____

Complies: Yes / No