Multiple Dog Application

Resident/Occupier Application Kit

City of Kalamunda

Application to Keep More than 2 Dogs - Resident/Occupier Application Kit
Section 26 - Dog Act 1976

Thank you for your application to keep more than two dogs.

Please read this application carefully, ensuring all areas are completed. Incomplete applications CANNOT be processed.

By completing this application you will be applying for an exemption to be granted by the City of Kalamunda, as provided in section 26 of the *Dog Act 1976* (as amended), in order to permit you to keep the dogs referred to in this application. Once permission is granted it will only be for the dogs listed in this application. Permission is not transferable if an approved dog is no longer living at the property and if you acquire a new dog, a new application will be required.

All dogs over 3 months of age listed in this application must be registered with the City of Kalamunda. All Residents are to ensure registrations remain current for the life of the dogs listed on the application.

If you are in breach of the *Dog Act 1976* your application can be revoked.

Once the City has received your application and prescribed fee payment, surrounding properties will be surveyed. The information collected, along with details contained in your application, will form the basis of the report.

Once a decision has been made by the Manager of Community Health and Safety, you will receive written confirmation of the report.

Please complete and sign the attached forms, and return them to the City along with your $156.55 lodgment fee payment.

Forms can be returned to the City of Kalamunda:

- **In Person:** Monday to Friday during office hours
- **Via Post:** PO Box 42, Kalamunda WA 6926
- **Emailed:** enquiries@kalamunda.wa.gov.au

Applications may take up to two (2) months to process, allowing for survey and reports to be compiled.

Please note the $185.00 lodgment fee is non-refundable.

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APPLICANT DETAILS - FULL NAME IN BLOCK LETTERS

Given Name: Surname:

Email: D.O.B:

Telephone (home): (Work): (Mobile):

Residential Address:

Suburb: Post Code:

Postal Address (if different to above):

Description of Premises - Are you the owner of the premises? If you are not the owner of the premises as stated above, you must attach written approval from the owner or authorised agent, to keep the dogs detailed in this application. Application may be rejected if not provided.

Property Address where dogs will be kept:

Size of lot in m^2:

How long have you resided at the above premises?

Please provide a description of the fencing on the property for the purpose of containing your dogs:

Do you intend breeding these dogs on the property? (tick) Yes ☐ No ☐

Will the dogs be contained within a kennel or enclosure? (tick) Yes ☐ No ☐

Are you affiliated with any organisation or association of Dog owners? (tick) Yes ☐ No ☐

If yes to above, please state the name and address of the Organisation?

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Description of dogs to be kept (maximum of 6 dogs)

	Breed	Sex	Sterilised	Colour	Name	Registration No	Age	Local Government
1.								
2.								
3.								
4.								
5.								
6.								

Have you had dogs registered within any other WA Local Governments? If Yes, provide details.

Local Government:

Previous Address:

Names of canines registered at this address:

Have you or another person who has had control of the above-mentioned dogs, been subject to a complaint, penalty or investigation with regards to the keeping of the above dogs?

APPLICATION DECLARATION:

I declare that:

I, the undersigned, make an application to keep more than two dogs at my property address and hereby declare that the information contained in the application is true and correct. I am aware that it is an offence to provide false and misleading information.

I understand that the City of Kalamunda may be required to carry out an inspection of the nominated premises. I agree that the City of Kalamunda may at any time withdraw or amend the terms of any exemption which may at any time be granted with respect to section 26 of the *Dog Act 1976* (as amended).

I understand that for the purpose of the application, the information on the numbers, breed, sex and location of the dogs covered in this application will be released to surrounding properties as part of the City of Kalamunda application process.

I understand the application is assessed by the Manager of Community Hubs and Safety and after a resolution, I will be informed in writing of the outcome of this application.

I understand that if I am aggrieved with the decision of the City, I have the right of appeal to the State Appeals Tribunal in writing.

I declare that the information provided in this application by me is true and correct.

Name: Printed Name of Applicant

Signed: Signature of Applicant

Date:

Name: Printed Name of Witness

Signed: Signature of Witness

Date:

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Office Use Only	
Neighbour 1	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 2	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 3	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 4	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 5	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 6	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	

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Office Use Only	
Neighbour 7	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 8	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 9	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 10	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 11	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	
Neighbour 12	
Name:	
Address:	
Phone:	
Approval:	Yes ☐ No ☐
Reasons:	