

NOTICE OF CHANGE IN DETAILS

FORM

PLEASE SELECT ONE OR BOTH ANIMAL MANAGEMENT RATES

WHAT WOULD YOU LIKE TO CHANGE OR UPDATE?

- S1: Address or Personal Details S2: Animal has been microchipped S3: Change of Ownership for Animals
 S2: Animal has been de-sexed S2: Deceased animal S4: Other (specify in Section 4)

SECTION 1: CHANGE OF ADDRESS OR PERSONAL DETAILS

Owner's Name:	Date of Birth:
New Home Address:	Previous Home Address:
New Postal Address:	Previous Postal Address:
New Email:	
New Contact Number:	Secondary Contact Number:

SECTION 2: CHANGE OF ANIMAL DETAILS (ANIMAL 1)

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence or a Statutory Declaration Form
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

CHANGE OF ANIMAL DETAILS (ANIMAL 2)

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence or a Statutory Declaration Form
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

More information can be added overleaf

SECTION 3: CHANGE OF OWNERSHIP FOR ANIMALS

Animal Name:	Tag Number (if known):
Current Owner's Name:	Previous Owner's Name:
Current Owner's Address:	Previous Owner's Address:
Current Owner's Number:	Previous Owner's Number:
Current Owner's Signature:	Previous Owner's Signature:
Date:	Date:

Note for the current owner: Please provide a signed Statutory Declaration Form for change of ownership.

Note for the previous owner: The previous owner of the animal will need to contact the appropriate microchipping animal registry to update new owner details.

Please turnover for more information

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CHANGE OF ANIMAL DETAILS (ADDITIONAL ANIMALS)

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

Animal Name:	Tag Number (if known):
Has this animal been de-sexed?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide proof of evidence
Has this animal been microchipped?	<input type="checkbox"/> NO <input type="checkbox"/> YES – please provide microchip number
Is this animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

SECTION 4: OTHER

Name:	Address:
Please specify your change of information:	

OFFICE USE ONLY:

Animal Number:	Tag Number:
Approving Officer:	Date:

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Please return completed form in person or email at palmerston@palmerston.nt.gov.au