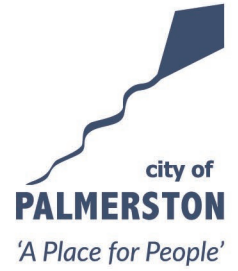


# NOTICE OF CHANGE IN DETAIL FORM



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

New Postal Address

Previous Home 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 the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

## Change of animal details (animal 2)

ANIMAL NAME:	TAG NUMBER (if known):
Has the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

## 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:

*Current owner: Provide a signed Statutory Declaration Form for change of ownership. Previous owner: Contact the microchipping animal registry to update new owner details.*

## CHANGE OF ANIMALS DETAILS (ADDITIONAL ANIMALS)

ANIMAL NAME:	TAG NUMBER (if known):
Has the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

ANIMAL NAME:	TAG NUMBER (if known):
Has the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

ANIMAL NAME:	TAG NUMBER (if known):
Has the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

ANIMAL NAME:	TAG NUMBER (if known):
Has the 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 the animal deceased?	<input type="checkbox"/> NO <input type="checkbox"/> YES

## SECTION 4: OTHER

Name \_\_\_\_\_

Address \_\_\_\_\_

Please specify your change of information

\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

## OFFICE USE ONLY

Animal Number:	Tag Number:
Approving Officer:	Date:

The City of Palmerston complies with the Information Privacy Principles contained in the Information Act 2002. These principles protect the privacy of personal information collected and held by Council. Council's privacy statement is available from the City of Palmerston, Civic Plaza, 1 Chung Wah Terrace, or via our website at [www.palmerston.nt.gov.au](http://www.palmerston.nt.gov.au)

Please return completed form in person or email at [palmerston@palmerston.nt.gov.au](mailto:palmerston@palmerston.nt.gov.au)