



DOG REGISTRATION Change of Dog Details Form

Litchfield Council (Dog Management) By-laws

OWNER DETAILS		
Surname		DOB:
Given names		
Phone	Mobile:	Work:
Postal address		
	Suburb:	Postcode:
Address where dog is kept		
	Suburb:	Postcode:

DOG DETAILS			
Dog 1 NAME		Tag No.	
Dog 2 NAME		Tag No.	
Dog 3 NAME		Tag No.	
Dog 4 NAME		Tag No.	

I wish to advise Council of the following changes to the dog/s listed above:

Dog is deceased
 Dog/s have left the municipality
 Address where dog/s are kept has changed

Previous Address where dog was kept		
	Suburb:	Postcode:

Dog is now de-sexed (*please attach a copy of the dog's sterilisation certificate*)

Signed _____

Date _____