Shire of Halls Creek

Application for a Certification of Cat Registration

Cat Act 2011

OFFICE – 71 Thomas Street Halls Creek WA 6770
MAIL – PO Box 21 Halls Creek WA 6770
PHONE – 9168 6007 FAX – 9168 6235
WEBSITE – www.hcshire.wa.gov.au EMAIL – hcshire@hcshire.wa.gov.au

Full name of owner or agent _____
Residential Address _____
Postal Address _____
Telephone; Home _____ Work _____ Mobile _____
Email _____

TEMP TAG #	ISSUED TAG #	CAT'S NAME	SEX	BREED	COLOUR & MARKINGS	AGE	DESEXED YES or NO	STERILISED YES or NO	MICROCHIP #

Application or Renewal for: 1 year ☐ $20
3 years ☐ $42
Application for lifetime registration ☐ $100

Owner or Agent Declaration:

I _____ [**print name**] being the owner or authorised agent of the owner of the cat whose details appear above declare;

- That I or the owner of the cat is not under 18 years of age.
- The details in this application are to the best of my knowledge and belief correct.
- And I certify, for the purposes of section 8 (1) of the Act, that on the premises at which the cat will ordinarily be kept, there are means for effectively confining the cat within those premises.
- And I understand, that I may be fined or charged a fee for any breach of the dog regulations as set in either the state or local law enforcement acts for cat or animal control.
- Does not have any convictions for offences against this Act, Dog Act 1976 or Animal Welfare Act 2012 in the past 3 years. If yes please, give details specifying the date of conviction(s), nature of offence and legislation involved _____

_____ Date: ____/ _____ / _____
(Signature of owner or agent)

SHIRE STAFF USE ONLY.

The registration is valid until 31st of October 20__ unless cancelled pursuant to section 8 of the Act.
Signature of Registration Officer _____ Date of issue ___ / ____ / _____
Amount Paid $ _____ Payment method (tick one) CASH ___ CHQ ___ EFT ___
Owner Code_____ Payment No._____ Receipt No:_____ Date Receipted __ / __ / ____

REPLACEMENT OF TAGE
(must be signed by Owner on receipt of replacement tag and authorised Ranger).

Tag # to be replaced _____ Replacement Tag # _____ Date reissued ___ / ___ / ___
Signature of Owner _____ Issuing Officer _____ Ranger's Auth. _____
Reason for replacement _____

Tag # to be replaced _____ Replacement Tag # _____ Date reissued ___ / ___ / ___
Signature of Owner _____ Issuing Officer _____ Ranger's Auth. _____
Reason for replacement _____