

Office:

Date:/...../.....

Time:

Name:

Unwanted Animals – Sign Over Form

ANIMAL OWNER DETAILS

Name:

Address:

Postal Address:

Phone Number:

☐ As the owner of the Animal/s, proof of ownership and photo ID is attached.

Please select the type of Proof provided:

☐ Animal signed over in the field - ID sighted by Authorised Officer - details (number, photo of id etc.):

☐ Microchip details ☐ Registration ☐ Statutory Declaration ☐ Other

Please detail reason for sign over:

ANIMAL DETAILS

Name	Breed	Sex/sterile	Colour	Rego	Microchip	Age	Regulated

DECLARATION OF LODGEMENT

I, the undersigned, declare the information I have provided on this form is true and correct; and I am the owner of the above mentioned animal/s, in the sense that I am;

- The registered owner of the animal/s; or
- The person who owns the animal/s, being my personal property; or
- The person who usually keeps the animal/s, including through an agent, employee or anyone else; or
- If a person mentioned in paragraphs (a) to (c) is a minor - a parent or guardian of the minor.

I acknowledge that by signing this animal over to Council I relinquish all and any claims to the animal and am no longer considered to be the owner of the animal and once I have signed this document cannot make a request to have the animal returned to me.

I understand that relinquishing the animal/s to Gladstone Regional Council may result in the animal/s being re-homed or euthanized by Gladstone Regional Council or another relevant re-homing agency and Council are not obligated to provide any further information regarding the nature or location of the animal.

Owners Signature:

Date:

PRIVACY ACT PERSONAL INFORMATION COLLECTION NOTICE:

The Gladstone Regional Council is collecting your personal information to process your request to sign over your animal to Council. Council is authorised to do this under the Local Government Act 2009. The information collected will be entered into Gladstone Regional Council's names and address database and may be used for any necessary Council business. The information will only be accessed by authorised Council employees. Some of this information may be given to an animal adoption agency to rehome your animal. This information will not be given to any other person or agency unless you have given us permission or we are required by law

OFFICE USE ONLY - (Local Law Officer to complete)

LL Officer Name:

Time & Date:

☐ Entered into Impoundment Register

ADMINISTRATION SECTION - (Admin Officer to complete)

Admin Officer Name:

Date Updated:

☐ Copy of form attached to register

☐ Copy emailed to pound officer

☐ Animal Status Updated