

Office:
Date:/...../.....
Time:
Name:

Private Impoundment Form (Animal)

IMPOUNDMENT DETAILS		
Date:	Time:	am/ pm
Location of Animal Impounded:		
PERSONAL DETAILS OF PERSON IMPOUNDING		
Full Name:		
Address:		
Home Telephone Number:		Mobile Telephone Number:
ANIMAL INFORMATION		
Species	Dog / Cat	Dog / Cat
Breed		
Age	--/--/--	--/--/--
Sex	Female / Male	Female / Male
Description of animal		
Identification		
Reason for Impoundment:		

DECLARATION

Gladstone Regional Council is collecting your personal information to process your application for private impoundment of an animal. 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 a person who finds your animal and wishes to return it to you. This information will not be given to any other person or agency unless you have given us permission or we are required by law.

Signature or person impounding animal

Date:

I, _____ an authorised officer, hereby accept the animal listed above for private impounding from the person listed above.

Signature of authorised officer

Date: