



Application to Keep More Than 2 Dogs

Section 26 – Dog Act 1976

Resident / Occupier Application Kit

DATE: _____

PLEASE RETURN BY: _____

Instructions

Thank you for your application to keep more than two dogs.

Please read this application carefully, ensuring all areas are completed. Incomplete applications **cannot** be processed.

All dogs over 3 months of age listed in this application must be registered with the City of Kalamunda.

Once the City has received your application and prescribed fee payment, surrounding properties will be surveyed. The information collected, along with details contained in your application, will form the basis of the report.

Once a decision has been made by the Manager of Community Safety Services, you will receive written confirmation of the decision.

Please complete and sign the attached forms, return them to the City along with a \$155.00 lodgement fee payment.

Forms can be returned to the City of Kalamunda:

- **In Person:** Monday to Friday during office hours
- **Via Post:** PO Box 42, Kalamunda WA 6926
- **Emailed:** enquiries@kalamunda.wa.gov.au

Applications may take up to two (2) months to process, allowing for surveys and reports to be compiled.

Please note that the \$155.00 lodgement fee is non-refundable.

CITY OF KALAMUNDA
APPLICATION TO KEEP MORE THAN 2 DOGS
SECTION 26 – DOG ACT 1976

Name: _____

Address: _____

_____ Post Code: _____

Contact Number: _____

Address where dogs will normally be kept (*If same as above leave blank*):

Description of dogs to be kept (maximum of 6 dogs):

	Breed	Sex	Sterilised?	Colour	Name	Registration Number	Age	Local Government
1.								
2.								
3.								
4.								
5.								
6.								

Are you affiliated with any organization or association of dog owners? If so, please state the name and address of the organization?

What is the reason you seek to have more than 2 dogs at the property?

Have you or another person who has had control of the above-mentioned dogs, been subject to a complaint, penalty or investigation with regards to the keeping of the above dogs?

Description of Premises

What is the size of the property where the dogs will be kept? _____

Will the dogs be contained within a kennel or enclosure?

Have you had dogs registered within other WA Local Governments? If Yes, provide details.

Local Government: _____

Previous Address: _____

Names of canines registered at this address: _____

Are you the owner of the premises? _____

(If not, please provide written consent from the property owner or authorized agent and attach to this application.)

I _____

(Full Name)

Make application for an exemption to be granted as provided in section 26 of the *Dog Act 1976* (as amended) in order to permit me to keep more than two dogs at the premises stated in my application.

I understand that the City of Kalamunda may be required to carry out an inspection of the nominated premises. I agree that the City of Kalamunda may at any time withdraw or amend the terms of any exemption which may at any time be granted with respect to section 26 of the *Dog Act 1976*.

I understand that for the purpose of the application, the information on the numbers, breed, sex and location of the dogs covered in this application will be released to surrounding properties as part of the City of Kalamunda application process.

I understand the application is assessed by the Manager of Community Safety Services and after a resolution, I will be informed in writing of the outcome of this application.

I understand that if I am aggrieved with the decision of the City, I have the right of appeal to the State Appeals Tribunal in writing.

I declare that the information provided in this application by me is true and correct to the best of my knowledge.

Signed: _____ Date: _____

(Applicants Signature)

Witness: _____ Date: _____