City of Wanneroo

Wanneroo Civic Centre
23 Dundebar Road, Wanneroo
Locked Bag 1, Wanneroo, WA 6946
Telephone (08) 9405 5000
Payment Hours Monday to Friday
8.30am-5pm

APPLICATION FOR A CERTIFICATE OF REGISTRATION

WA CAT ACT, 2011

Please sign and return form in its entirety to the postal address stated below.

OWNER'S PARTICULARS (ONE OWNER ONLY) Please print in BLOCK LETTERS

( ) Mr ( ) Mrs ( ) Miss ( ) Ms

Name in full _____

Address _____

Suburb _____ Age ____ D.O.B. ___/___/____

Phone H _____ W _____ M _____

Email _____

CAT'S PARTICULARS

Name of cat _____ Sex ( ) Female ( ) Male

Colour _____ Breed _____

Microchip number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Cat D.O.B. ___/___/___

Premises kept _____
(Address where the cat will normally be kept)

Number of cats at this address _____

SECOND POINT OF CONTACT

Name _____ Phone _____

Address _____

Relationship to owner _____

Postal address _____
(If different from above)

PLEASE READ AND SIGN THIS DECLARATION

Owner/agent declaration

I, _____ Full name or organisation/company name

of the above address declare that the information I have provided is true and correct. I am aware that it is an offence to provide false and misleading information.

Signed _____ Date _____

FOR OFFICE USE ONLY

W _____ _____ JADU Number _____

ANIMAL NUMBER _____ DATE OF ISSUE ___/___/___ STERILISED _____

SIGNATURE OF REGISTRATION OFFICER_____ NUMBER _____

EXPIRY DATE 31/10/ ____ NEW TAG NUMBER ☐☐☐☐☐

VERY IMPORTANT

1. Any change in particulars contained in this application including sale or death of cat **MUST** be notified to Council immediately.
2. Cats six months and over must be registered.
3. **Cat registration period : 1 November - 31 October (As from the 1st June each year, half the normal fee will be applicable to FIRST annual registrations only).**

STERILISATION

1. Is the cat sterilised? ◯ YES ◯ NO

If no, are you an approved breeder? ◯ YES ◯ NO

If no, please attach details of your exemption

FEES PAYABLE

	1 YEAR	3 YEARS	LIFETIME
Sterilised	**$20**	**$42.50**	**$100**

PENSIONER CONCESSIONS OF 50% APPLY* See below

*ACCEPTED UPON PRODUCTION OF:
Officer sighting ear tattoo at this office

W _____ _____

Pension card ☐☐☐☐☐☐☐☐☐☐

METHOD OF PAYMENT

1. In person: City of Wanneroo Civic Centre, 23 Dundebar Rd, Wanneroo. Mon to Fri 8.30am-5pm (EFTPOS available)
2. In person: Clarkson Library, Cnr Ocean Keys Blvd and Ebb Way, Clarkson. Mon to Fri 9am-noon, 12.45pm-5pm
3. By mail: addressed to - the Chief Executive Officer, City of Wanneroo, Locked Bag 1, Wanneroo WA 6946
4. Cheques are to be made payable to the 'City of Wanneroo'. Payment can also be made by Mastercard or VISA card.

PLEASE DO NOT SEPARATE - RETURN COMPLETE FORM

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CERTIFICATE OF REGISTRATION

_____

_____

_____

_____

CARD TYPE MasterCard ◯ VISA ◯

(Please tick appropriate box)

CARD NO ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

CARD EXPIRY DATE ____/____/_____

CARD HOLDER'S NAME _____

DATE ____/____/_____ AMOUNT _____

PHONE NUMBER _____

SIGNATURE _____

Your signature hereon is authority for us to issue a sales voucher for the full amount shown in the space above.

PLEASE NOTE A CREDIT CARD SURCHARGE OF 0.57% WILL APPLY.

**A current Pensioner Concession card or a copy of either a Centrelink or Department of Veteran Affairs 'Commonwealth Seniors Health Card' together with a Seniors Card must be produced to claim concession.*