

1. Owner Details

Owner Name

Postal Address

Property Location (if different from above)

Contact Numbers

Phone (home) Phone (work) Mobile

Email

2. Dog Details

Name of Dog

Tag Number Date of Death

(Please attach registration tag)

3. Refund Details

Please refund the remaining portion of the current year's registration to:

Rates Account Valuation Number

Direct Credit to my bank account

Account Holder's Name

Name of Bank Branch

Bank/Branch Bank Account Suffix

A printed bank deposit slip that matches the details of the applicant applying for the refund must be attached to this application.

Under the Dog Control Act 1996, the refundable amount of the fee is based on the number of complete months remaining in the registration year after the date of the request for the refund.

4. Owner Declaration

I understand that making a false statement in this application may make me liable upon conviction to a fine not exceeding \$3,000 under Section 41A of the Dog Control Act 1996.

Owner Signature Date

5. Office Use

Owner No. Date Actioned

Refund Amount Actioned by

Credited to rates Refunded NCS Record updated Yes No