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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
| Applicant’s Name:  Address: | |  | | | | | | | | | | | |
| Telephone: | |  | | | | | | | Mobile | | | | |
|  | |  | | | | | | |  | | | | |
| Address at which it is proposed to keep the dogs ………………………………………………………………….………………………… | | | | | | | | | | | | | |
| **Licence Details** | | | |  | | | |  | | |  | | |
| I hereby apply for a licence to keep *(state number)* ……………… dogs at the address shown, and I furnish the following particulars relating to the dogs proposed to be kept thereon. | | | | | | | | | | | | | |
| Name | Registration  Number | | | | Sex  M / F | Breed | | | | Age | | ✓ *Tick Appropriate Column* | |
| Kept Now | Proposed To Keep |
|  |  | |  | |  |  | | | |  | |  |  |
| I understand that permission, if granted, is subject to any conditions which the Council may impose in order to prevent nuisance or annoyance to neighbours or conditions likely to be offensive or injurious to health. | | | | | | | | | | | | | |
| Signed ……………………………………………………………. | | | | | | | Date …………………………………………………………………… | | | | | | |

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| **Who May Apply** |
| You are eligible to apply to keep more than two dogs if:   1. Your dogs have not been impounded within the previous two years. 2. There have been no justified complaints received by the Animal Services Unit regarding the control of any dogs in your care. 3. You have not been convicted of an offence in relation to the control of dogs. 4. Your dogs remain registered in accordance with the Dog Control Act 1996. 5. The kennels or place of confinement must be kept in a clean and sanitary condition. 6. You have not been issued with and paid / ordered to pay, an infringement notice.   **Please Note** : Approval is subject to a property visit.  For further Information, please contact: ***Animal Services***  ***Tauranga City Council***  ***Private Bag 12022, Tauranga 3143***  *Once the form is complete, please email it to* [*dog.registration@tauranga.govt.nz*](mailto:dog.registration@tauranga.govt.nz)*.* |

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| *(Office Use Only)* | |
| Approved …………………………………………………………………………….. | Date Issued …………………………………….……………………………………... |