Application to Keep More Than 2 Dogs

Section 26 – Dog Act 1976

Resident / Occupier Application Kit
Instructions

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

Please read this application carefully, ensuring all areas are completed. Incomplete applications **can not** 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, history 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):

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<tr>
<th>Breed</th>
<th>Sex</th>
<th>Sterilised?</th>
<th>Colour</th>
<th>Name</th>
<th>Registration Number</th>
<th>Age</th>
<th>Local Government</th>
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What is the maximum number of female canines to be kept at any one time? __________

What is the maximum number of male canines to be kept at any one time? __________

How many canines are kept at the above premises? ______________________________

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? ____________________________

Please describe the type and number of buildings on the above premises:
___________________________________________________________________________________________
___________________________________________________________________________________________

Please describe the height and material of the fencing used to contain the dogs:
___________________________________________________________________________________________
___________________________________________________________________________________________

Where is the fence positioned on your property?
___________________________________________________________________________________________
___________________________________________________________________________________________

Will the dogs be contained within a kennel or enclosure?
___________________________________________________________________________________________

How long have you resided at the premises stated on the application?
___________________________________________________________________________________________

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.)
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: ______________________