

Application for Multiple Cat Licence

Applicant's details:

First Name:	Last name:
Address:	
Mobile:	Landline: (02)
Email address:	
Date of Birth:	
Secondary contact:	
Relation to secondary contact:	
Mobile:	Landline: (02)

Circle your answer:

1. Do you understand the application fee of \$65.75 is to cover the associated processing costs regarding this application, and if the registrar refuses to issue the licence under section 84C, on first attempt, you will only be permitted two (2) opportunities to rectify the issue/s. Failure to meet the criteria for licencing after the third attempt will result in the licence application being refused, and forfeiture of the application fee.

Yes No
2. Do you intend to breed cats? Yes No
 If yes, you are required to apply for a Sexually Entire Animal Permit on approval of this application if the cat is older than 3months of age, followed by a Breeder's Licence on approval of the SEAP application if the cat is of breeding age (between 12months and 7 years).
3. Have you had any conviction or finding of guilt within the last 10 years against a law of a state or territory for an offence relating to the welfare, keeping or control of an animal? Yes No
 If yes, please provide details.

4. Are you disqualified from keeping any animals in the ACT or other jurisdictions? Yes No
 If yes, please provide details.

5. Have you read all requirements of the Animal Welfare Act 1992 and any approved or mandatory code of practices? Yes No
6. Are your cats contained to your property? Yes No



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7. As part of the application process, a property inspection at your address will be conducted. Neighbouring occupants may be contacted to determine potential impacts on them and their properties, do you understand this may occur? Yes No
8. Do you currently hold a permit to keep an animal that is not de-sexed? Yes No
9. Do you currently hold a permit to keep four or more cats at the premises? Yes No

List all cats residing at the address:

Name:	Name:
Microchip:	Microchip:
Breed:	Breed:
Colour:	Colour:
Age:	Age:
Sex:	Sex:
Is the animal de-sexed?	Is the animal de-sexed?

Name:	Name:
Microchip:	Microchip:
Breed:	Breed:
Colour:	Colour:
Age:	Age:
Sex:	Sex:
Is the animal de-sexed?	Is the animal de-sexed?

Name:	Name:
Microchip:	Microchip:
Breed:	Breed:
Colour:	Colour:
Age:	Age:
Sex:	Sex:
Is the animal de-sexed?	Is the animal de-sexed?

Name:	Name:
Microchip:	Microchip:
Breed:	Breed:
Colour:	Colour:
Age:	Age:
Sex:	Sex:
Is the animal de-sexed?	Is the animal de-sexed?

This application made by me accurately sets out the evidence that I would be prepared, if necessary, to give in the Tribunal as a witness. The application is true to the best of my knowledge and belief.

Applicant's signature:

Date:

Authorised officer's signature:

P:

Date:

Please submit completed form in person at Domestic Animal Services or via email to
TCCS_DASPermitAndLicences@act.gov.au