



RUAPEHU DISTRICT COUNCIL

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SELECTED OWNER POLICY STATUS APPLICATION FORM

Office Use Only

Ref: _____ File: D66-0017 Doc: _____ Date: _____ Staff Initials: _____

I, _____, of _____, hereby make application for Selected Owner Policy (SOP) status.

Name(s) of Dog(s):

(Please Note: A permit is required to keep more than two dogs on an urban property. Maximum number of dogs permitted on an urban property is four.)

SELECTED OWNER POLICY CRITERIA

Selected Owner Policy (SOP) status is assigned to those owners who make application and who meet the following criteria:

- *Compliance with Dog Control Act 1996 and Control of Dogs Bylaw 1997*
- *Dog currently registered by due date (**30 June of each registration year**)*
- *Clear record for previous 12 months (including no history of complaints or impoundings)*
- *Dog(s) kept under control at all times*

Failure to comply with the above conditions will result in a Selected Owner losing the SOP status for a minimum period of two registration years. The above criteria will apply for reinstatement of the SOP status.

I have read and understand the criteria for SOP status and believe that I qualify. I understand that I will lose SOP status should my dog(s) or I commit an offence against the Dog Control Act 1996 or the Control of Dogs Bylaw 1997. **I have enclosed my \$30.00 application fee.**

Signature (Applicant)

Date

<u>Office Use Only</u>	
Dog Owner No: _____	Fee Paid: _____
Date: _____	Database Updated: _____
VG No: 631030/117	Receipt No: _____

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Date and time of inspection: _____

Inspected by: _____

Housing or Kennelling? YES NO

Dogs General Health: _____

Canine Knowledge Discussed? YES NO

SOP Status application: **APPROVED / DECLINED**

Signature (Animal Control Officer)

Date