

## **RUAPEHU DISTRICT COUNCIL**

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Counc	

## Animal Control Declaration Form/Part Refund of Registration Fees

Owner Name:	
Residential Address	
Postal Address	
I have completed a declaration form re	eporting that the following has occurred to the under-mentioned dog (s):
	Re-homed Deceased (Go to No 2) (Go to No 3)
Name of Dog (s):	
Registration No (s): (Registration tags should be returned where possible)	
1 Dog(s) registered with	District/City Council
Date Registered	
2 Dogs(s) given to	
Address	
On	-
3 Dog(s) deceased since	
I hereby confirm that the above info contained in Section 42 and 54 of the Signature of Owner	ormation relating to dog(s) in my care is correct. I understand my obligation as Dog Control Act 1996.
Date	
Bank Account Details - Ref dogs only)	und is provided by Direct Credit only (applicable to deceased
Name of Bank	
Account Name	
Account Number	
Office Use Only	
Dog Owner No:	Date:
Refund Amount:	Purchase Order No:
Database Updated: Yes 1	No