



JOB NUMBER: _____

VOLUNTARY SURRENDER OF A DOG

DETAILS OF OWNER

Name: _____ Contact No: _____

Address: _____

DETAILS OF DOG

Name: _____ Breed: _____ Age: _____

Colour: _____ Gender: Male / Female Sterilised: Yes / No

Registration No: _____ Microchipped: Yes / No Microchip No: _____

Is it aggressive to other animals? Yes / No / Unknown Animal Type: _____

Is it aggressive to people? Yes / No / Unknown Comment: _____

Is it good with children? Yes / No / Unknown Comment: _____

Reason for surrender? _____

Is there anything else we need to know (things the dog likes/dislikes)?

Veterinary clinic your dog last attended (please list any vaccinations or health issues)

I hereby declare the information I have provided on this form is true and correct.

I am the owner of the dog and do voluntarily surrender the dog to the City of Busselton (the City).

I acknowledge by signing this dog over to the City I relinquish all and any claim to the dog and am no longer considered to be the owner of the animal and relinquish all rights to the dog and once I have signed this document cannot make a request to have the dog returned to me.

I further acknowledge that by relinquishing all ownership and rights to the dog that the City will dispose of the dog in an appropriate manner.

I agree and herewith pay the surrender fee of \$140.00 for this request.

(Office use: CL 441-10950-1594-0000)

Signed: _____ Date: ____/____/____

Witnessed: _____ Date: ____/____/____
(City of Busselton Authorised Person)