

Area Office: Rodney North Shore Waitakere Auckland Manukau Papakura Franklin

DOG OWNER DETAILS

Full name: _____ Date of birth: _____

Address where dog was kept: _____

Postal address: _____

Mobile phone: _____ Home phone: _____ Business phone: _____

DOG DETAILS

Name of dog: _____ Date of dog's death: _____

Dog registration tag no: _____ Please attach a copy of a vet certificate or dog's registration tag if you have one.

I REQUEST A REFUND

The refundable amount of the fee is based on the number of complete months remaining in the registration year after the date of the request for the refund.

I (print name): _____ request a refund of any unused registration fee to be paid to

Account holder's name: _____ Name of bank: _____

NB: Your refund will only be processed when accompanied by a printed bank deposit slip or other bank generated document that matches the details of the applicant applying for the refund.

Signature: _____ Date: _____

I understand that making a false statement in this application may make me liable upon conviction to a fine not exceeding \$3,000 under Section 41A of the Dog Control Act 1996.

FOR OFFICE USE ONLY

Date actioned: _____ Owner reference number: _____

Refund amount: _____ Actioned by: _____