

# Request for refund of dog registration fee



## Dog owner details

Dog owner's full name:

Date of birth:     /     /

(Requirement for identification purposes under the Dog Control Act)

Address where dog was kept:

Postal address:

Postcode:

Mobile ph:

Home ph:

Business ph:

## Dog details

Name of dog:

Date of refund request:

Registration tag number:

(Please attach a copy of a vet certificate or dog's registration tag if you have one)

## Reason for refund request

Deceased

Exporting overseas

Overpayment

## 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, (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.

### Please return to:

Animal Management  
Auckland Council  
Private Bag 92300  
Auckland 1142

or

scan and email completed document to  
dogregistration@aucklandcouncil.govt.nz

### For office use only

Date actioned:

Owner reference number:

Dog reference:

Refund amount:

Actioned by: