Application for: Excess Animal Permit



opportunity » growth » lifestyle

HOW TO COMPLETE THIS FORM

- 1. Please ensure all animals have been registered with Council
- 2. Fill out all fields correctly using block letters
- 3. Complete the supporting documentation checklist
- 4. Ensure all supporting documentation is submitted to Council with the completed application form
- 5. Refer to the 'How to Apply' section for further information on how to submit your application

Please note: The application will not be processed unless all details are completed and all required supporting documentation has been provided.

PLEASE ALLOW TEN (10) WORKING DAYS FOR PROCESSING OF THIS PERMIT APPLICATION

SECTION 1: APPLICANT DETAILS	
Applicant Details – this section must be completed by the Applicant	
Applicant Surname	Applicant Given Name
Applicant Telephone	Applicant Email address
Applicant Address	
Suburb	State Post Code
Subuib	State
SECTION 2: DETAILS	
(1) What are the approximate measurements of the area within the	property where the animals will be kept?
(2) What method will be used to ensure the animals will be control	led within the property? (i.e. fence, enclosure)
(3) Do you have intentions of breeding these animals?	
Yes No	
(4) Please provide a reason as to why approval to keep these anim your application.	nals should be considered or any other information in support of

SECTION 2: DETAILS cont.								
		cal Law sets the requirements for Scheme allows a greater number.		mal permits, unl	ess a planning per	rmit issued under the		
oroviolone or a	The Frankston Franking C	•	NIMAL DET	AILS				
	Breed	Sex	Desexed	Age	Animal	, Animal Name		
1		(Female/Male)	(Yes/No)		Reference N	10.		
2								
3								
4								
5								
5								
ECTION 3:	SUPPORTING DOC	UMENTATION CHECKLIST						
he following		nkston City Council at the time of	application.	Applications red	eived without the	required documentation		
Additio *please	nal animal/s currently ensure the additional ar	registered within municipality nimal/s have been registered with	Council pric	r to submitting t	nis form.			
ECTION 4:	STATEMENT OF AC	CCEPTANCE						
his section m	nust be completed by all	applicants.						
Conditions of ransferred or	Issue and Use' and wis assigned to another part	rovided is true and correct. I have she to apply for the selected permy and will be solely used for the pupport of this application will result	nit to use in urposes as s	accordance with tated. I agree to	n these terms. I we return the permit it	vill ensure that the permit is not		
pplicants Na	me							
Applicants Signature					Date			
rimary purpose o provide your r our personal in neans your app	of assessing your eligibility neighbours with the opportu formation will not be disclos	ecting your privacy. The personal infor for the selected permit. Your address nity and right to comment/object to the sed to any external party without your d. If you wish to gain access to, or alte	and purpose application. \ consent, unles	of your application We may also need as required or auth	will be disclosed to to contact you from orised by law. Failure	neighbouring property occupiers in o time to time for directly related purpo e to provide the information required		
IOW TO AF	PPLY							
Please detach elow.	the completed applicati	on form and return with the requir	red supportir	ng documentatio	n to Council via o	ne of the methods		
In Person	Civic Centre 30 Davey Street Frankston VIC 3199	Seaford Community Centre Shop 1, 6 Broughton St Seaford, VIC 3198				Carrum Downs Library Lyrebird Drive Carrum Downs, Vic		
By Mail	Frankston City Council PO BOX 490 Frankston VIC 3199							
⊠ By Email	Please email the completed application form to: info@frankston.vic.gov.au							
	C	OFFICE USE ONLY - All	I fees are	non-refund	able			
Pavee Name					DEDMIT ADDI I	ICATION FEE \$132.00		

Account Code: LC

Address: