

| Current Owner Details | | | | | | |
|-----------------------|----------------------------|---------|-----------|--|--|--|
| Owner's Name: | | | | | | |
| Current address: | Street/Road Name: Town: | | Postcode: | | | |
| Phone: | | Mobile: | | | | |

| Animal Name: | Breed: | |
|------------------|-------------------|--|
| Registration No: | Microchip No.: | |

□ sold

I certify that I am no longer the registered owner of this animal.

My pet has been

given away

| New Owner Details | | | | | | |
|-------------------------------------|---|----------------------------|-----------|--|--|--|
| Owner's Name: | | | | | | |
| Address where animal is kept: | Street/Road Name: | | | | | |
| - | Town: | | Postcode: | | | |
| Phone: | | Mobile: | | | | |
| Postal address if different from | Street/Road Name: | | | | | |
| above: | Town: | | Postcode: | | | |
| Concession: | Yes 🛛 No 🖵 | Pensioner Card No.: | | | | |
| | | War Widow or TPI Card No.: | | | | |
| | Health care and concession cards are <u>not</u> accepted. Proof must be supplied by cardholder. | | | | | |

I declare that the above information is true and correct, and I make it with the understanding and belief that the person who makes a false declaration is liable to the penalties of perjury.

| Previous owner's signature: | | Date: | |
|------------------------------------|---|---------------------------------|-----------------|
| New owner's signature: | | Date: | |
| - | | | |
| Glenelg Shire Council F | O Box 152, PORTLAND VIC 3305 | Phone: 1300 GL | ENELG (453 635) |
| National Relay Service: 13 36 77 e | mail: <u>locallaws@glenelg.vic.gov.au</u> website | website: www.glenelg.vic.gov.au | |

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