

## **REGISTRATION OF PREMISES AS A DOMESTIC ANIMAL BUSINESS**

(Domestic Animals Act 1994)

Name of Applicant								
Postal Address of Applicant								
Post code			Phone					
Fax								
Email								
Business/Organisation Name:								
Business/Organisation lo	ocation:							
Description of use of Pro	emises:							
2. All Domestic Animal If the application is grainssue of such permit and	with code of permits exported I agree from time to	of practic ire annua to abide o time ap	ally on 10 • by the to oplying in	April. erms and c respect of	of Boarding Establishments  conditions imposed by the Alpine Shire on the dissue of such permits.  The issue of such permits officer by Telephoning:			
Signature of Applicant	I declare that all the information in this application is true and correct							
This form must be signed by the owner/occupier	Name of applicant:							
	Signature (if not submitting electronically):							
	Date:							
Lodgement	Email: info@alpineshire.vic.gov.au  Post: Alpine Shire Council, PO Box 139, Bright VIC 3741  In Person: Alpine Shire Council Office, 2 Churchill Ave, Bright VIC							



Fee	A fee is payable to process this application. More information about paying this fee will be forwarded to you by email. Refer to www.alpineshire.vic.gov.au for further details.							
Office Use	Permit number:		Permit date:					
	Receipt no:							

## **Privacy notification**

Council will ensure that any personal information provided by you is managed in accordance with the requirements of the *Privacy and Data Protection Act 2014*. If you fail to provide contact details your application will not be considered.