

CASSOWARY COAST REGIONAL COUNCIL

INNISFAIL QLD 4860

PO Box 887

Ph: 1300 763 903 Fax: (07) 4061 4258

Email: enquiries@cassowarycoast.qld.gov.au

| Approved Form 2.39: Request to Reclaim an Impounded Animal | | | | | | | |
|--|------|----------------------------|--|--------------------|--|--|--|
| Applicable Law: Cassowary Coast Regional Council Local Law No. 1 (Administration) 2022 Cassowary Coast Regional Council Local Law No. 2 (Animal Management) 2022 | | | | | | | |
| Your Application will not be properly made unless the Approved Form 1.7: Application to Council (What I Want) is attached. | | | | | | | |
| Council Reference: (Application number) | EAI2 | EAI2023/ | | | | | |
| Customer Request (CR#) | AN2 | AN2023/ | | | | | |
| Animal ID number: | | | | | | | |
| Applicant Details: | | | | | | | |
| The applicant is the (please tick) | | Owner of the animal | | Responsible person | | | |
| Information of Impounded Animal | | | | | | | |
| Date of Impoundment: | | | | | | | |
| Species of animal: | | Dog Other (please specify) | | Cat | | | |
| | | Carlot (produce operating) | | | | | |
| Animal name: | | | | | | | |
| Breed: | | | | | | | |
| Sex: | | Male | | Female | | | |
| Has the animal been desexed? | | Yes | | No | | | |
| Age: | | | | | | | |
| Distinguishing features: | | | | | | | |
| | | | | | | | |
| Microchip number: | | | | | | | |
| Registration number: | | | | | | | |
| Is this a regulated dog?: (i.e. dangerous/menacing) | | Yes | | No | | | |

| Checklist: | | | | | | | |
|---|---|--|--|---|--|--|--|
| _ | I have attached copies of the relevant information (Council (What I Want) | mation to this form |). | | | | |
| Prescribed Fees 2023 | -2024: | | | | | | |
| Release Fee - Initial Release - Cat or Registered Dog - in life of the animal - per animal | | | | | | | |
| Release Fee - Initial Release - Impounded Unregistered Dog - in life of the animal - per animal | | | | | | | |
| Release Fee - Second Release - Cat or Registered Dog - in life of the animal - per animal | | | | | | | |
| Release Fee - Third an animal | d Subsequent Releases - Cat or Registered D | og - in life of the ani | mal - per | \$ 214.00 | | | |
| | est 24 hours - per day for each day following | | | \$ 16.20 | | | |
| the making of enquirion Commonwealth department | information provided by me in this applicates and exchange of information with author the timent in regards to any matters relevant to | rities of any Local, o this application | State/Territo | ory or | | | |
| | the animal is needed as evidence for a pro animal, it will not be released. | ceeding or a propo | osed proceed | ling for an | | | |
| The decision to release an impounded animal under section 2.39 of Cassowary Coast Regional Council Local Law No. 2 (Animal Management) 2022 and Cassowary Coast Regional Council Local Law No. 1 (Administration) 2022 will be based on the information set out above in the Approved Form 2.39 Request to Reclaim an Impounded Animal. | | | | | | | |
| PRINT NAME DATE DATE | | | | | | | |
| Information Privacy S | | | | | | | |
| information is authorised the purpose of delivering the <i>Information Privacy A</i> | has been collected for the purpose of assessing younder the Local Government Act 2009. You are proservices and carrying out Council business. Your pact 2009 and will be accessed by persons who have son or agency unless you have given Council permi | oviding personal inform ersonal information is I been authorised to do | nation which wil nandled in acco so. Your inforn | Il be used for ordance with nation will not | | | |
| | V | | , , | | | | |
| OFFICE USE ONLY: | Application Creation: PBE \rightarrow EnfImpound \rightarrow S | Select respective an | imal type | | | | |
| Application Number: | Number: EAI2023/ Date://_ | | | | | | |
| Receipt No.: | ceipt No.: Admin Initials: | | | | | | |
| OFFICE USE ONLY: | LOCAL LAW OFFICER TO COMPLETE | | | | | | |
| | en made within the prescribed period Law No 2 (2022) in section 2.39(5) or any r 2.39(6)? | ☐ Yes ☐ | No | | | | |
| Is a Permit or registration required for the keeping of the animal, and has it been obtained? | | | | | | | |
| Is there a Compliance has it been complied v | Notice issued in relation to the animal, and with? | Yes _ | No | | | | |
| Is there a Permit in rel been complied with? | ation to the animal and have the conditions | Yes _ | No | | | | |

Has a destruction order been made for the animal, and is it still

current?

□ No

☐ Yes



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| Approved Form | 1.7 Appli | cation to | Council | (What I | Want) |
|---|-----------------------|-----------------------|-------------------|-------------------|-------------------------------------|
| Applicable Law: Cassowary Coast Regional Council Local Law No. 1 (Administration) 2022 | | | | | |
| For most applications to Council, you must complete Approved Form 1.7: Application to Council (<i>What I Want</i>) and an approved form relevant to your application, provide the supporting documentation identified in the approved forms and make payment of the prescribed fee. | | | | | |
| Type of application | | | | | |
| ☐ Prescribed Activity | ☐ Amendmer | nt [| Renewal | | ☐ Transfer |
| Applicant details Note: the applicant is the person re all Cassowary Coast Regional Cou be issued to the applicant. The app | ncil application forn | ns is correct. Any ap | proval that may b | oe issued as a co | onsequence of this application will |
| Applicant's name: | Title | First name | | name | |
| | | | | | |
| Applicant's phone: | | | | | |
| Applicant's email: | | | | | |
| For companies: Business name | | | | | |
| ABN: | | | | | |
| Director name/s: | | | | | |
| Name of Agent / Contracto (if not the applicant) | or | | | | |
| Contact number/s: | | | | | |
| Email address: | | | | | |
| Residential address: | | | | | |
| Postal address: | | | | | |
| New Permit - provide a bri | ef description | of the activity y | ou want perr | nitted | |
| | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |

| Property where the activity is to take place (if applicable) | | | | | | | | | | |
|---|---|---|--------------------------------------|---------------|------------|---|--------------|-------|------------|-----|
| Property ID Number: To be completed by Council if not known | | Note: This number is important and should be used on all correspondence relating to this matter | | | | | | | | |
| Property address: | | | | | | | | | | |
| Property description | 1: | | Lot N | 0. | | Plan No. | 1 | | | |
| (lot and plan) | | | | | | | | | | |
| Name of owner of pr not the applicant: (e | | ·) | | | | 1 | | | | |
| Street/Park Name: | | | | | | | | | | |
| Is the property priva | toly | | | ☐ Yes ☐ No | | | | | | |
| owned? | itery | | If no, | please provid | de propert | y owner n | name & p | hone: | | |
| Is the property a dwelling unit or multi-residential? | | t | | Yes | | <u> </u> | □ No | | | |
| | the property in the nvironmental Management Conservation Zone? | | ☐ Yes | | □ No | | | | | |
| | | | • | | | | | | | |
| Fee Waiver / Fee Red | duction R | equ | est | | | | | | | |
| Is this application for a | | | - | | | event or initiative | | | | |
| legal not-for-profit organisation or charity | | comi | imunity purpose? be based Cassowa | | | d in the organisation based on the Cassowary Coast? | | | | |
| group? | | | | | | | | | | |
| Yes No | Ye | es | No | | Yes | No | No | | No | |
| | | | | | | | | | | |
| Checklist: | | | | | | | | | | |
| For most applications to Council, you must complete Approved Form 1.7: Application to Council (What I Want) and an approved form relevant to your application, provide the supporting documentation identified in the approved forms and make payment of the prescribed fee. | | | | | | | relevant | | | |
| I have attached the additional Approved Form required for my application. | | | | | | | | | | |
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| I/ We declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application | | | | | | | | | | |
| PRINT NAME DATE DATE | | | | | | | | | | |
| | | | | | | | | | | |
| Payment options | Ac -f 4 ' | ub : C | 2022 | 0000111011110 | ot Dasie | al Coursell | - ا جمد النب | mae = | ant marine | nto |
| As of 1 July 2022, Cassowary Coast Regional Council will no longer accept payments by cash or cheque at Customer Service Centres, and other Council run facilities. You can pay via EFTPOS at the Customer Service Centres between 8:30am to 4:30pm Monday, Tuesday, Thursday & Friday; and 9:30am to 4:30pm on Wednesdays (excluding public holidays). | | | | | | pm | | | | |
| Over the phone | Please tick if you would like to pay by credit card and an officer will call you to take payment after your application form is received. | | | | | | | | | |
| Ву ВРау | Please tick if you would like an invoice to be emailed so you can pay by BPay. | | | | | | | | | |

| OFFICE USE | |
|---------------------|--|
| Application Number: | |

General Application to accompany all applications to Council for permits to undertake prescribed activities and non-prescribed activities. This Approved Form 1.7 Application to Council (What I Want) is approved by the Chief Executive Officer for the local laws.

The Council may, by written notice, request the applicant to provide further reasonable information or clarification of information, documents or materials to be included in the application. Council may require an application to include site plans, management plans, relevant consents, evidence of public liability insurance etc. Please not an application to Council may require approvals under another Act, for example in relation to development, building, liquor carriage of goods and business licensing etc. Should the applicant not provide information, documents or materials to be included in the application, the application may lapse. See Section 7 Cassowary Coast Regional Council Local Law No 1 (Administration) 2022.

Information Privacy Statement:

Your personal information has been collected for the purpose of assessing your Application for a Permit. The collection of your information is authorised under the *Local Government Act 2009*. You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the *Information Privacy Act 2009* and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law.