

ABN 42 686 389 537 – PO BOX 151, KYNETON VIC 3444 T 03 5422 0333 – F 03 5422 3623 – <u>mrsc@mrsc.vic.gov.au</u> – www.mrsc.vic.gov.au

## **Application to Surrender an Animal**

Pursuant to S.33A of the Domestic Animals Act

States: I, of

Telephone: D/L No:

I am the lawful and rightful owner of the animal described below.

I make application to surrender the animal described in this application to an Authorised Officer of Macedon Ranges Shire Council because I am no longer willing or able to care for the below animal.

I fully acknowledge by signing this document that this animal immediately becomes the property of the Macedon Ranges Shire Council, who will hold, rehome or destroy the animal.

I acknowledge that Council cannot guarantee a home and animals not suitable for adoption will be euthanased. I am therefore aware that my animal may be euthanased (put to sleep/death) by an overdose of barbiturates (lethal injection) if it is not considered suitable for adoption.

I have been further advised that this action does not, in any way, negate any future action of the Council for any offence that may have occurred with the animal whilst the animal was under my care.

### Description of Animal

Animal type	Breed		Colour	Age	
Name	Se	x	Desexed	Yes No	
Microchip No		Registration N	lo		
Special requirements (dietary/grooming)		_			
Vaccination/heartworm details					

I certify that I have read, understood and agree to the above conditions.

I hereby acknowledge that the details provided in this application are true and correct and I make it in the belief that a person making a false statement in the circumstances is liable to the penalties of perjury.

Signed	Date	
Witness signature	Name	

#### Privacy

The collection and handling of personal and health information is in accordance with Council's Privacy Policy which is displayed on Council's website, <u>mrsc.vic.gov.au/privacy</u> and available for inspection at or collection from Council's customer service centres.

# Office use only—Officer Report

## Checklist for handover of animals

Date of handover:

	Yes	No
Reason for surrender:		
Is it house trained?		
Are there any previous complaints relating to the animal?		
Has it been with children?		
Are there any health problems with the animal?		
Date of last vaccination://		
Is it sociable with other animals?		
Is the animal sterilised?		
Does the animal have any bad habits?		
Officer recommendation/s:		

Officer name:

Officer signature: