## **Pet Application Form**

Strata p	olan number:			
Addres	s of plan:			
Lot Nur	mber and Apartment Num	nber		
Applica	nt's name:			
Telepho	one:	Email:		
Type of	<sup>t</sup> pet:			
Age of	pet:	Name of pet:		
	otion of the pet:			
	·			
Vaccina	ated: Yes □ No □	Micro-ch	pped: Yes □ No □	
local cou			re required by law to be registered with the some councils in the Northern Territory and	
I (The A	Applicant)			
request propert		ers Corporatio	n to keep the above detailed pet on our	
Signed				
Date				
	list (Please ensure that oplication)	you provide	all documents listed below with	
	Pet application form		Vaccination information	
	Colour photograph/s (150mm x 100mm) of the animal(s)			
	Council registration ce	Council registration certificate		
	Microchip certificate		Veterinarian contact details (optional)	