

WAIROA DISTRICT COUNCIL

REGULATORY DEPARTMENT

a +64 6 838 7309

⊕ +64 6 838 8874

☑ Compliance@wairoadc.govt.nz

⊕ www.wairoadc.govt.nz□ PO Box 54, Wairoa 4160, Hawke's Bay

★ Coronation Square, Queen Street, Wairoa

APPLICATION FOR A LICENCE TO KEEP THREE OR MORE DOGS ON A PROPERTY

Applicant Details					
Full Name of Appli	cant:				
Date of Birth of App	plicant:				
Property Address:					
Phone Number of A	Annlicant·				
		a+ba.			
	ver the Age of 3 Mor				
	Dbedience Club or F	Related Affiliations:			
Details of Dogs	None	0 .1.	D	A	
Reg. No.	Name	Colour	Breed	Age	Sex
	ot for breeding purp	oose or more dogs pleas	o attach a convito t	ho pormit as ovidor	200
Sketch attached	ing permit to keep 3	or more dogs pleas	e attach a copy to t	ne permit as evider	ice.
Neighbouring Pro	operties				
		showing the positio			y. Please note on
		e parties noted in th	e below section resi	ide.	
1. Name and addre	ess:				
2. Name and addre	ess:				
3. Name and addre	ess:				
4. Name and addre	ess:				
Declaration by Ap	plicant				
I, <u>full name of a</u>	applicant , de	clare the informatio	n above to be corre	ect and hereby appl	y for selected owner
status.					
Signature					
Applicant					