



APPLICATION FORM CAT MANAGEMENT FACILITY OPERATOR FORM 121

Date stamp

Part 1 Applicants Details

Name

Daytime Contact Phone Number

Mobile Phone

Postal Address

Email Address

Are you the Legal Owner of the premises in question?

 Yes No, please ensure you also complete Part 2 and have the Owner(s) of the premises sign Part 3

Part 2 Premises details of proposed Cat Management Facility

Lot No

Street No

Street Name

Suburb

Part 3 Owner(s) of Premises (ONLY complete if the Applicant is NOT the legal owner of the premises)

Owner(s) Name

Daytime Contact Phone Number

Mobile Phone

Postal Address

Email Address

I hereby consent to my premises being utilised as a Cat Management Facility.

Signature

Date

Part 4 Infringements

Have you, or anyone else who will be responsible for the cats, ever been convicted of a breach of the Cat Act 2011, Dog Act 196 or Animal Welfare Act 2002 within the past three (3) years?

 NO

YES, please details below:

Part 5 Please provide justification for applying to be a Cat Management Facility Operator:

Part 6 Declaration

I certify that the details on this application are true and correct (false or misleading information may affect my application). I understand that completion of this form does not constitute automatic approval of my application.

I agree to abide by the requirements of being a Cat Management Facility Operator such that I: -

Agree to comply with the Cat Act 2011, Cat Regulations 2012 and the Shire of Dardanup Keeping and Control of Cats Local Law 2014;

I acknowledge that to be approved as a Cat Management Facility Operator, the premises from which I operate must also be an approved Cat Management Facility.

Signature of Applicant

Date

Part 7 Return form to

Shire of Dardanup
1 Council Drive/PO Box 7016
EATON WA 6232

Phone: (08) 9724 0000
Email: records@dardanup.wa.gov.au

Part 8 OFFICE USE ONLY – PAYMENT AUTHORISATION

Assessing Officer Name:	<div style="border: 1px solid black; width: 180px; height: 25px;"></div>	Authorising Officer:	<div style="border: 1px solid black; width: 180px; height: 25px; text-align: center;">Robert Quinn</div>
	<small>Yes/No</small>		<small>Initial</small>
Fees Paid (Receipt attached)	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>	Approval Granted/Refused	<div style="border: 1px solid black; width: 180px; height: 25px;"></div>
Site Assessed	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>		<small>Yes/No</small>
Neighbour's Comment Sought	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>	Certificate Issued	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>
Recommended Approval	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>	Corresponding Approval issued for a Cat Management Facility	<div style="border: 1px solid black; width: 110px; height: 25px;"></div>
	<small>Initial</small>		<small>Initial</small>
		Date	<div style="border: 1px solid black; width: 180px; height: 25px;"></div>