Administration Building: 180 Mort Street Lithgow Postal Address: PO Box 19 Lithgow NSW 2790

Phone: (02) 63549999

council@lithgow.nsw.gov.au **Email:** Web: www.lithgow.nsw.gov.au

59 986 092 492 ABN:



Surrender of Companion AnimalPlease complete all sections and when completed please submit this form to Council.

(SUBURB) (STATE) (POSTCODE) (TELEPHONE) (D.O.B.) (IDENTIFICATION – e.g. Licence) Being the owner of, Animal Details Species: Breed:			(NAME)			
(SUBURB) (STATE) (POSTCODE) (TELEPHONE) (D.O.B.) (IDENTIFICATION – e.g. Licence) Being the owner of, Animal Details Species: Breed: Colour: D.O.B.: Sex: Male/Female Desexed: Yes/Notest Microchip No.: Other ID: Is/has the animal been subject to an Order or Declaration under the Companion Animals Act 1998: Peclaration In submitting this document, I acknowledge that: I/We declare that the information provided in this form is true and correct to the best of my knowledge in an 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithg City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised.	Of					
Reing the owner of, Animal Details Species:		((ADDRESS)			
Being the owner of, Animal Details Species:	(SUBURB)	(STATE)		(POSTCODE)		
Species:	(TELEPHONE)	(D.	O.B.)	(IDENT	IFICATION – e.g	. Licence)
Species:	Being the owner of,					
Name: Sex: Male/Female Desexed: Yes/Note Microchip No.: Other ID: Is/has the animal been subject to an Order or Declaration under the Companion Animals Act 1998: Yes/Note Peclaration In submitting this document, I acknowledge that: I/We declare that the information provided in this form is true and correct to the best of my knowledge I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised.		Anin	nal Details			
D.O.B.: Sex: Male/Female Desexed: Yes/Note Microchip No.: Other ID: Other ID: Is/has the animal been subject to an Order or Declaration under the *Companion Animals Act 1998: Yes/Note *Declaration* In submitting this document, I acknowledge that: • I/We declare that the information provided in this form is true and correct to the best of my knowled in this animal. • I am 18 years of age and over and the legal owner of this animal. • No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. • I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. • I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. • I understand that not all animals are rehomed and that my pet may be euthanised.	Species:		Breed:			
Microchip No.:	Name:		Colour:			
Is/has the animal been subject to an Order or Declaration under the Companion Animals Act 1998: Declaration In submitting this document, I acknowledge that: I/We declare that the information provided in this form is true and correct to the best of my knowledge. I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised.	D.O.B.:	Sex:	Male/Female	:	Desexed:	Yes/No
Declaration In submitting this document, I acknowledge that: I/We declare that the information provided in this form is true and correct to the best of my knowledge. I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithg City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised.	Microchip No.:		Other	· ID:		
 In submitting this document, I acknowledge that: I/We declare that the information provided in this form is true and correct to the best of my knowledge. I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 	· ·	an Order	or Declaration	under t	the	Yes/No
 I/We declare that the information provided in this form is true and correct to the best of my knowled. I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 		De	claration			
 I am 18 years of age and over and the legal owner of this animal. No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 	In submitting this document, I ack	nowledg	e that:			
 No other person has any proprietary interest in this animal or, if any other person has such an interest they have authorised me to surrender the animal. I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 	I/We declare that the information	n provided	in this form is true	and corr	ect to the best o	f my knowled
 I agree to indemnify the Lithgow City Council and keep the Lithgow City Council indemnified again claims (if any), cost and expenses whatsoever arising out of any action by any person claiming into in the animal. I understand that by completing and signing this form that I have surrendered the animal to Lithgo City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 	No other person has any propriet	tary interes	st in this animal or,		her person has s	uch an intere
 City Council, and it no longer belongs to me. I understand that not all animals are rehomed and that my pet may be euthanised. 	claims (if any), cost and expense	•	•	-	•	_
euthanised.				nave surre	endered the anin	nal to Lithgow
C'analana A		animals a	are rehomed a	nd that	my pet may	be
	Constant		5 .		,	

Animal Information Checklist

Reason for Surrender:					
Any health information that shou pregnant:	ld be declared. E.g. Surgeries, allergies, is the animal				
Please state any behavioural issu	es associated with this animal:				
Please provide temperament info best described your animal.	ormation regarding this animal. Please tick the boxes that				
☐ Friendly with Adults	☐ Friendly with Children				
\square Friendly with other dogs	☐ Understands basic commands				
\square Likes walking on a lead	□ Other				
Please advise if this animal is up	to date with immunisation: \square Yes \square No				
OFFICE USE ONLY					
DATE REVEIVED:/	/ RECEIPT NO.:				
RECEIVED BY:					
RECEIPTED BY:					
SIGNATURE:					
NOTES:					

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

By completion of this form, you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly related to the function of Council. Information provided to Council may be used in conjunction with any of Council's business operations. We will take reasonable care not to disclose personal information. Exempt documents may come under the Government Information (Public Access) Act 2009.

Maintained By Dept:	ENV	Effective Date:	Review Date:
Version:	2	13 February 2023	February 2028