

Animal Ownership Transfer



ANIMAL DETAILS

COUNCIL ANIMAL ID NUMBER	MICROCHIP NUMBER	ANIMAL NAME

PREVIOUS OWNER

Name:			
Address:			
Home Ph:		Mobile:	
Signature:			
Date:			

A Statutory Declaration, from the current owner relinquishing ownership of the animal to the new owner, must accompany this form.

Council registration will not be transferred without the Statutory Declaration.

NEW OWNER

Name:		DOB:	
Address:			
Postal Address:			
Animal Kept at Address: (if different)			
Home Ph:		Mobile:	
Email:			
Pension Card Number:			
Signature:			
Date:			

Animal Ownership Transfer



Email: animals@mornpen.vic.gov.au

Phone: (03) 5950 1000 or 1300 850 600

Mail: Mornington Peninsula Shire Private Bag 1000, Rosebud, Victoria, 3939

In Person: Office Hours: 8.30am – 5pm Monday to Friday (excluding public holidays)

2 Queen Street Mornington
21 Marine Parade Hastings
90 Besgrove Street Rosebud
14 Edward Street Somerville