

Details of Dog Owner/Handler

Name

Date of birth

Address

Contact number

Email

Postal address

Parent or Guardian Details

Name

Parent/guardian address

Parent/guardian contact number

Information Privacy

The personal information requested on this form is being collected by Council for the purpose of processing your application for a legal point of discharge. The personal information will be used by Council for that primary purpose or directly related purposes. The information may also be used to update Council's customer databases to assist Council in discharging its functions or providing services. The personal information collected will not otherwise be disclosed unless permitted or required by law. If the information is not collected we are unable to process your application and provide the service sought by you. Requests for access to and/or amendment of personal information should be made to Council's Privacy Officer.

Relationship to applicant

Details of Assistance Dog

Dog's name

Dog's date of birth

Breed

Colour

Sex

☐

Male

☐

Female

Microchip number

Is the dog a declared dangerous, menacing or restricted breed dog?

☐

Yes

☐

No

Is the dog over 12 months of age?

☐

Yes

☐

No

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Is the dog desexed?

☐ Yes

☐ No

Has the dog been trained to perform tasks or functions that assist a person with a disability to alleviate the effects of their disability?

☐ Yes

☐ No

Dog Trainer Declaration

Trainer's full name

Company name

Contact number

Trainer's email

Qualifications

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Has the dog completed obedience training provided by a dog trainer, either separately, or as part of, the training undertaken to perform tasks or functions that assist the person with a disability to alleviate the effects of their disability?

- ☐ Yes
☐ No

Date obedience training was completed

Health Professional Declaration

Health Professional's name

Handler's name

Duration of treatment

Assistance Dog Free Registration Terms and Conditions

It is important that you understand the terms and conditions of the registration fee exemption for assistance dogs before you apply.

The Commonwealth Disability Discrimination Act 1992 and Victoria's Equal Opportunity Act 2010 protect people with disabilities from discrimination. This includes protection from discrimination because a person has an assistance dog. The registration fee exemption does not provide further protections or access rights for assistance dogs, it only entitles an assistance dog to a registration fee exemption with council.

To be eligible for the assistance dog registration fee exemption, it is a requirement that your dog is not:

- a declared dog (menacing or dangerous)

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- a restricted breed dog
- younger than 12 months of age.

Your assistance dog must be both obedience trained and trained to alleviate the effects your disability. Obedience training must be provided by a dog trainer, where:

Dog trainer means a person who:

- provides training at a dog obedience training organisation approved under section 5B of the Act; or
- has a Certificate III in Dog Behaviour and Training or Certificate IV in Companion Animal Services.

Obedience training means a training program that assesses an assistance dog in the following:

- heeling or walking with a handler, without sniffing, marking or wandering;
- sociability with other dogs;
- responsiveness to a handler's commands, including staying on command (known as a stay test) and coming to a handler on command (known as a recall test);
- absence of aggression towards humans or other animals;
- absence of anxiety, stress, fear, or undue excitement when in public places; and
- standard of hygiene appropriate for a public place.

If you, as the owner/handler of the assistance dog, are convicted of two or more offences under the Domestic Animals Act with respect to the same assistance dog, the assistance dog is no longer eligible for the zero registration fee and you will be required to pay the full registration fee.

It is understood that the applicant accepts the Assistance dog free registration terms and conditions when submitting this application form.

Applicant / Guardian / Agent Statement

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The applicant or the guardian/agent must sign the following.

By signing below, I verify the following:

- I certify that to the best of my knowledge the information in this application is correct
- I have a disability and I require the assistance of an assistance dog
- I accept that my medical practitioner and/or the trainer(s) of my assistance dog may be contacted to verify information provided in this application
- I understand and accept the terms and conditions set out in Section 5 of this form.

Signature of applicant or guardian/agent (must be 18 years and over)

Applicant or guardian/agent signature

Full name of guardian/agent

I declare that I have read and explained the contents of this application to the applicant and that the details set out for the applicant are correct.

Relationship to applicant

Phone number

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