



APPLICATION FOR SELECTED OWNER STATUS

WAIMATE DISTRICT COUNCIL CONSOLIDATED BYLAW 2008
(Amended 1 July 2015)

Full name: _____

Owner Number: _____ Phone: _____

Address: _____

The property is: ☐ Owner Occupied ☐ Rental

Type of dog and Numbers of Dogs Kept (*Breeding Dogs – Resource Consent must be applied for*)

☐☐☐☐☐

Sporting &
& Gun/Racing
Dogs

Farm Working
Dogs

Pet
Dogs

Show
Dogs

Breeding
Dogs

	Reg Number	Age	Name	Breed	Colour
1					
2					
3					
4					
5					

Total number of Dogs for which a status is sought

☐

Application fee is payable in accordance with Council Schedule of Fees.

CONDITIONS GOVERNING THE ISSUE OF SELECTED OWNER STATUS ON A PROPERTY

Dog owners who meet the following criteria may apply to Council to have "Selected Owner" status. Please complete the following checklist to ensure your application is complete and able to be processed.

		Yes	No
1	No dog owned by them in the last two years has: <div style="margin-left: 20px;">(a) Been impounded, chased or returned home by a Council Animal Control Officer; or:</div> <div style="margin-left: 20px;">(b) Been the subject of a bona-fide complaint.</div>	<input type="checkbox"/>	<input type="checkbox"/>
2	The dog owner has not received infringement notices from Council in the last two years.	<input type="checkbox"/>	<input type="checkbox"/>
3	The owner has been a registered dog owner who has resided within the Waimate District for at least one year. <i>An exemption to this may be made for dogs transferring from another district where written evidence has been provided by the relevant authority that this status or similar was held.</i>	<input type="checkbox"/>	<input type="checkbox"/>
4	The dog(s) is not classified as dangerous.	<input type="checkbox"/>	<input type="checkbox"/>
5	The dog(s) is not classified as Menacing by breed or deed.	<input type="checkbox"/>	<input type="checkbox"/>
6	The owner's property is suitably fenced and gated to ensure it is dog proof.	<input type="checkbox"/>	<input type="checkbox"/>
7	Independent access, clear of any area where dogs may be at large is available to at least one door of the dwelling.	<input type="checkbox"/>	<input type="checkbox"/>
8	The owner's section is appropriate for the number and size of the dog(s).	<input type="checkbox"/>	<input type="checkbox"/>
9	All dogs owned or kept by the owner have been registered, kept and controlled in accordance with the Act and the current Council Dog Control Bylaw.	<input type="checkbox"/>	<input type="checkbox"/>
10	All dog registration fees have been paid for the past two years by due date.	<input type="checkbox"/>	<input type="checkbox"/>
11	A Selected Owner status application fee is payable in accordance with Council schedule of fees. Fee attached.	<input type="checkbox"/>	<input type="checkbox"/>
12	The dog(s) is micro-chipped (excluding farm working dogs).	<input type="checkbox"/>	<input type="checkbox"/>
13	Any information regarding the purchase of, death, sale or transfer of dogs to and from the applicant's property, including movement of any pups born on the premises shall continue to be notified in writing to Council within one month.	<input type="checkbox"/>	<input type="checkbox"/>

		Yes	No
14	Any change of residential address shall be notified in writing to the Council within 14 days.	<input type="checkbox"/>	<input type="checkbox"/>
15	Any faecal matter (droppings) deposited by the applicant's dog(s) in any public place or on any land other than that occupied by the applicant will be removed appropriately and deposited in a suitable receptacle.	<input type="checkbox"/>	<input type="checkbox"/>
16	The applicant understands that any breach of the Selected Owner status conditions will lead to the immediate cancellation of their privileges under this Policy.	<input type="checkbox"/>	<input type="checkbox"/>
17	All applications for permit will require a site assessment by a Council Animal Control Officer. I consent.	<input type="checkbox"/>	<input type="checkbox"/>
18	I acknowledge that Council Animal Control staff reserve the right to make a property inspection when re-assessing any application for permit.	<input type="checkbox"/>	<input type="checkbox"/>
19	This application is only for a change of address inspection. Fee enclosed.	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION BY APPLICANT

I, the undersigned, declare that the attached information to be correct and hereby apply for selected owner status at the property above.

Signature of Applicant

Date

Application Approved

Date