Renmark Paringa Council

PO Box 730 RENMARK SA 5341 T (08) 8580 3000 F (08) 8580 3030
E council@renmarkparinga.sa.gov.au
W www.renmarkparinga.sa.gov.au

PET REGISTRATION REFUND
Request Form

APPLICATION / REGISTRATION INFORMATION

ENQUIRIES AND APPLICATION / REGISTRATION FORMS TO:
Renmark Paringa Council –
PO Box 730
61 Eighteenth Street, Renmark SA 5341
Phone: 08 8580 3000
Fax: 08 8580 3030
Email: council@renmarkparinga.sa.gov.au

OVERVIEW:
Refunds will only be available to owners who registered their dog on or before 31 August as this is the annual due date for pet registrations.

A full refund - if the request is made within two (2) months of payment of a pet registration in a current registration period.
A 50% refund – if a request is made after two (2) months but before three (3) months of payment of the pet registration in a current registration period.

PROCEDURE:
Upon the submission of a signed Pet Registration Refund Request form by the animal's owner, in which the owner will certify that the animal is deceased, council staff will consider the above criteria and administer a refund within 14 days.

SECTION 1: CONTACT DETAILS

Name of Owner:	
Phone:	
Email:	
Residential Address:	
Postal Address:	

SECTION 2: DOG DETAILS

Name of Dog:	
Registration Number:	
Date Registration Paid:	
Amount Paid:	
Date of Death:	

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SECTION 3: BANK ACCOUNT DETAILS	
Account Name:	
BSB:	
Account Number:	

SECTION 4: DECLARATION	
I hereby confirm that the information provided on this form is true and accurate at the time of submitting this application. I agree that any refund amount is to be deposited by Council into the account provided in Section 3.	
Name:	
Signature:	
Date:	

SECTION 4: OFFICE USE ONLY						
Approval:	Granted:			Refused:		
Approved by:						
Position:						
Signature:						
Date:						