

63 Miranda Street PO Box 320 Stratford 4352 Phone. 06 765 6099 stratford.govt.nz

Application for the Release of Impounded Dog/Stock

APPLICANT						
Name						
Address						
Phone (Work) Home						
Email						
Signature				Date		
DETAILS OF DOG						
NAME	TAG NO.	BREED	SEX		NI	EUTERED
					Yes	s No
Impounding Record (Number of impoundings recorded against this dog) 1 2				2	3 4	Other
DETAILS OF STOCK						
BREED		NUMBER OF STOCK		TAG N	O'S./BRAND	
FEES PAID						
	_		_		AMOU	NT\$
Impounding Fee						
Registration fee (if applicable)						
Sustenance Fee						
Microchipping Fee						
TOTAL DUE: (To be paid before release)						
Receipt No.				Date		