Nelson City Council
Te Kaunihera o Whakatū

Dog Registration Update Notification

Please complete relevant sections, sign and return to: Nelson City Council, PO Box 645, Nelson	
Owner Name:	**Owner Number:**
Address:	
Phone Number:	

☐ **CHANGE OF OWNER'S CONTACT DETAILS** *Effective Immediately*	New Address:	
	New Phone Number:	
	New Email:	
☐ **CHANGE OF DOG'S OWNERSHIP**	Dog's Name:	Registration Number:
	New Owner's Name:	
	Address:	
	Date of Birth:	Phone No:
	Email:	
New Owner's Signature:		Date:
☐ **DEATH OF DOG**	Dog's Name:	Registration Number:
	Date of Death:	☐ I DO NOT REQUIRE A REFUND ☐ I REQUIRE A REFUND
	Please note: Refunds/Credits will be processed from the date this notification form is received. If you have selected that you do not require a refund the remaining unexpired registration amount will be added to the dog owner file as a credit.	

Please complete below if you require a refund for the unexpired remaining registration fees for a deceased dog

BANK ACCOUNT DETAILS – NAME OF ACCOUNT HOLDER:

Bank	Branch Number	Account Number	Suffix

Bank: Branch:

IT IS AN OFFENCE TO MAKE A FALSE STATEMENT IN RESPECT OF DOG REGISTRATION

Current Owner's Signature: Date:

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