



# CARRATHOOL SHIRE COUNCIL

9-11 Cobram Street Goolgowi NSW 2652  
 PO Box 12 Goolgowi NSW 2652  
 Ph: 6965 1900 Fax: 6965 1379  
 Email: council@carrathool.nsw.gov.au

## STATUTORY DECLARATION OATHS ACT 1900, NSW, EIGHTH SCHEDULE

### NOTICE OF DEATH, LOSS OR SURRENDER OF AN ANIMAL

I, the undersigned \_\_\_\_\_

of \_\_\_\_\_ in the State of New South

Wales, do solemnly and sincerely declare that:-

The following animal has either **Died** or has been reported **Missing** or **Surrendered** to Council.  
 (Circle one of the following)

**DIED**

**MISSING**

**SURRENDERED**

Dog / Cat Name of animal: \_\_\_\_\_ Breed: \_\_\_\_\_

Description: \_\_\_\_\_

Microchip No: \_\_\_\_\_

Address Usually Kept: \_\_\_\_\_

Owners Date of Birth: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**Please complete if the animal is either Deceased or Missing**

I make this solemn declaration conscientiously believing the same to be true and by virtue of the *Oaths Act 1900*.

Declared at \_\_\_\_\_ on \_\_\_\_\_  
 (Place) (Date)

Signature: \_\_\_\_\_ Name: \_\_\_\_\_

In the presence of an Authorised Witness, who states:

I, \_\_\_\_\_ a \_\_\_\_\_  
 (Name of Authorised Witness) (Qualification of Authorised Witness)

Certify the following matters concerning the making of this statutory declaration by the person who made it: (\*Please cross out any text that does not apply\*)

1. I saw the face of the person OR \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
2. I have known the person for at least 12 months OR \*I have not know the person for at least 12 months, but I can confirm the person's identity using an identification document and the document I relied on was

\_\_\_\_\_  
 (Describe identification document relied on)

\_\_\_\_\_  
 (Signature of Authorised Witness)

\_\_\_\_\_  
 (Date)

**Please turn over if animal is being surrendered to Council**

O:\Common\Document Control\Forms & Checklists\Adopted\Dog Death Loss Surrender - Stat Dec.docx	Effective Date:	14/09/2018
Uncontrolled document when printed. Please refer to website or intranet for controlled document	Version No.:	5

**FORM 17 - NOTICE OF DEATH, LOSS OR SURRENDER OF AN ANIMAL**

**IMPORTANT INFORMATION FOR SURRENDER OF AN ANIMAL ONLY**  
**PLEASE READ CAREFULLY**

Please make the following declarations:

1. I am 18 years of age or over and the legal owner of this animal.
2. No other person has any proprietary interests in this animal or, if any other person has such an interest, they have authorised me to surrender the animal.
3. I agree to indemnify Carrathool Shire Council and keep the Carrathool Shire Council so indemnified against all claims (if any), costs and expenses whatsoever arising out of action by any person claiming interest in the animal.
4. I understand that by completing and signing this form that I have surrendered this animal to Carrathool Shire Council and it no longer belongs to me.
5. **I UNDERTAND THAT NOT ALL ANIMALS CAN BE REHOMED AND THIS ANIMAL MAY BE EUTHANISED.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_