***Exotic Diseases of Animals Act 1993***

Controlled Area Order No.1/2020 and Control Order No.1/2020

**Dog movement notification**

|  |  |
| --- | --- |
| **Dog owner / carer’s details – person responsible for moving dog out of Kimberley** | |
| **Name** |  |
| **Home address** |  |
| **Phone number** |  |
| **Email address** |  |
| **Physical address (in the Kimberley region)** |  |
| **Date of movement** |  |
| **Dog details (please fill out a separate form for each individual dog)** | |
| **Name** |  |
| **Microchip #** |  |
| **Age** |  |
| **Breed** |  |
| **Sex** | M F Desexed female Desexed male |
| **Dog tick treatment** | **Dog details (fill out a separate form for each individual dog)** |
| **Name of tick treatment applied** |  |
| **Date applied** |  |
| **Destination** | **To reflect the details of the person responsible for the dog at destination. Please indicate ‘as above’ where appropriate.** |
| **Name** |  |
| **Address** |  |
| **Phone number** |  |
| **Email address** |  |
| **Physical address of the location of the dog (street address or suburb/shire)** |  |

Email the completed form to: [animalbiosecurity@dpird.wa.gov.au](mailto:animalbiosecurity@dpird.wa.gov.au). You can email a photo of the form, scanned PDF or the Word file, or paste the details into an email.

If you have questions about the form, ring (08) 9368 3929.