



DOG/CAT REGISTRATION CANCELLATION

Owner's Name: _____
Residential Address: _____
Dog <input type="checkbox"/> Cat <input type="checkbox"/> (please tick)
Dog/Cat's Name: _____
Registration Number: _____
Date of Cancellation: _____

Reason for cancellation:
Deceased: <input type="checkbox"/> Transferred out of City: <input type="checkbox"/> Other: _____

Signature: _____
Date: _____

Office use only:
Records amended: _____
Date: _____

Please email / fax or return form to:

City of Albany
102 North Road, Yakamia WA 6330
Fax number: 9841 4099
Email: staff@albany.wa.gov.au