

OSHAKATI TOWN COUNCIL

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APPLICATION DOG REGISTRATION AND LICENSING

DOG REGIOTRATION AND LIGENSING	
☐ New application	Renewal
(Mark with an "X")	
NAME OF THE DOG	
NAME OF OWNER	
DOG'S PHYSICAL ADDRESS	
Erf AREA AREA	
POSTAL ADDRESS	
TELEPHONE OR CELL NO	
E-MAILADDRESS	
All applicants for a new registration, are requested to submit the following; Copy of owner , should be attached.	oy of dog health passport, one
In case of request for permit, the premise will be ready for inspection on: DATE OF 20	E THIS: DAY
Applicant's signature	Date
FOR OFFICIAL USE ONLY	
Registration fee:	
Receipt No:	
Date:	