

# Change of circumstances for dog registration

## When to use this form

Use this form if you need to make any changes to your current dog registration. This can include:

- moving to a different municipal area
- death of a dog
- change of address for 60 days or longer (if both the previous and current addresses are within the Hobart municipal area).

These above requirements are in line with Part 2 of the *Dog Control Act 2000*.

If you are moving from a different municipal area into the Hobart municipal area you will need to complete the [Dog registration application](#).

## Dog's details

Dog's name Required

Tag number Required

Desexed (Select 1 option) Required

yes

no

Microchip number Required

## Dog owner's details

**First name** Required

**Last name** Required

**Email address** Required

**Telephone number** Required

**Address in Hobart where your dog is currently registered (your old address)** Required

(type your address below or select the 'use my current location button')

### What are your change of circumstances?

**I need to update my details because: (Select 1 or more options)** Required

- I have changed address within the Hobart municipal area (for 60 days or longer)
- I have moved to a different municipal area
- my dog has passed away
- other reason

Complete this field if you made a selection that includes 'other reason' in *Dog owner's details : I need to update my details because:*

**What is the reason?** Required

Complete this field if you made a selection that includes 'I have changed address within the Hobart municipal area (for 60 days or longer)' in *Dog owner's details : I need to update my details because:*

**What is your new address?** Required

(type your address below or select the 'use my current location button')

Complete this field if you made a selection that includes 'I have changed address within the Hobart municipal area (for 60 days or longer)' in *Dog owner's details : I need to update my details because:*

**Is this your postal address? (Select 1 option)** Required

- yes
- no

Complete this field if you selected 'no' in *Dog owner's details : Is this your postal address?*

**Postal address** Required

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## Declaration

**In submitting this form: (Select 1 or more options)**

- I declare that the information I have provided is true and correct. Required
- I agree that by typing my name below I have signed this form. Required

**Name of signatory** Required

**Date** Required

(Submitting online? Use the calendar icon on the right to select the date.)

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For information on how Council manages, handles and protects personal information it collects please refer to the [Privacy Statement and Policy](#).

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*End of form*