## Intention to keep a pet

Use this form to notify the Chief Executive Officer (Housing) of your intention to keep a pet and/or assistance animals at your premises. Please include all pets and assistance animals you will be keeping at the premises. You must not keep any pets at a premises for 14 days after lodging this form, unless you receive confirmation from the Chief Executive Officer (Housing) approving your pet and/or assistance animal to be kept at the premises.

Fields marked with asterisk (*) are mandatory.						
Client details*						
Title	Mr/Mrs/Ms/Miss/Other		Are you a current tenant?	Y/N		
Full name						
Contact number			Mobile			
Premises details*						
What is the address the pet/assistance animal will be kept at?						
Pet/Assistance animal details						
Is the animal you intend to keep an assistance animal?*	Y/N		How many animals wi kept on the premises?			
Is your pet/assistance animal desexed?	Y/N		Is your pet/assistance animal registered with local council?			
What type of animal/s is your pet/assistance animal?* e.g. dog/cat			What is or will be you pet/ assistance anima name?* e.g. Max			
What breed is your pet/assistance animal?* e.g. greyhound/siamese						
What is the age of your pet/assistance animal?						
Please describe your pet/assistance animal's behaviour or any other information						



## Declaration - read this before signing

Territory Families, Housing and Communities collects only your personal information which is necessary to provide housing assistance under the *Housing Act 1982* and its Regulations.

If you do not provide the requested information we may not be able to provide you with assistance. The information collected will not be disclosed to anyone without your consent unless it is required or authorised by law in accordance with the Information Privacy Principles at Schedule 2 of the *Information Act 2002* (NT). You have a right to access and correct the information held about you.

If you have any queries or concerns please contact the Legal and FOI Unit on (08) 8999 8490, email <a href="mailto:infoact.tfhc@nt.gov.au">infoact.tfhc@nt.gov.au</a> or write to GPO Box 4621, Darwin NT 0801.

Full name		
Signature	Date	
Office Use Only		
Group number	Date received	
Receipting Officer name/User ID	14 days expiry date	

## **Further information**

Please attach any relevant registration or ownership documents to this form. All completed forms and supporting documents can be lodged at your local Housing office.