

The Body Corporate for Hermitage Gardens

APPLICATION TO PERMIT AN ANIMAL TO RESIDE

Name(s) of Applicant(s)			
Apartment Number		<input type="checkbox"/> Owner	<input type="checkbox"/> Tenant
Telephone (home)		Mobile	
Email address			
Type of pet		Breed	
Weight in Kg when full grown		Current Age	
BCC Registn No.		Is it Chipped?	
Is it Vaccinated?		Is it Desexed?	
Planned date for Occupancy		Other comments	
Dog applications only			
Is the dog house trained?		Is the dog socialised?	
Will there be someone home during the day to walk and toilet the dog?			
Do you understand that dogs are not to be allowed to use balconies as a toilet? They must be walked outside the building.			
Will the dog be trained and controlled to not bark?			

Have you complied with the following conditions? Please tick all relevant boxes.

I/We have:

<input type="checkbox"/>	Attached Brisbane City Council Registration Papers
<input type="checkbox"/>	Attached Vet References and Medical Records (where possible)
<input type="checkbox"/>	Attached photographs
<input type="checkbox"/>	Read and accepted all conditions as stipulated in the Body Corporate By-Laws with regard to the 'Keeping of Animals'

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I/We confirm that the information above is true and correct. I/we understand that if the application is successful we will agree to a commitment relating to the behaviour of the pet and to an enduring authority that in our absence if the animal is distressed to allow the Building Manager or nominee or failing that the RSPCA or the Police to enter the apartment to assess and remedy the situation.

Signature

Date

Signature

Date

Please forward your completed application with all relevant documentation to the Resident Manager for consideration at the next Committee meeting.

OFFICE USE ONLY	
<input type="checkbox"/> Yes _____ <input type="checkbox"/> Not applicable	Unit Owner Approval Obtained (date)_____
<input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended	Building Managers Recommendation _____ _____
	Date submitted to Committee for approval
<input type="checkbox"/> Approved _____ <input type="checkbox"/> Not approved	Committee Decision (date)_____ Responses For_____Against_____Abstain_____
	Date applicant informed of decision
<input type="checkbox"/> Ratified	Committee Decision ratified at next Steering Committee Meeting on the _____