


Request for Refund of Fees Dog Control 2026/27

Request for Refunds of Fees must be applied for within 3 months of your dog passing.

| | | | |
|---|--|-------------------------|--|
| Owner's Name | | | |
| Owner's Address | | | |
| Owner's Phone | | | |
| Email Address | | | |
| Dog's Name | | Month Dog Passed | |
| Tag Number | | | |
| Circumstances of Dog's Death <i>Please enter details do not leave blank</i> | | | |
| Payment Details: Bank account number: <i>(Proof is required – Please provide a bank deposit slip or a bank letter stating the bank account details. If neither is available, a screen capture of online banking please).</i>  | | | |
| Signature | | Date | |

| Office Use Only | | | |
|-------------------------|--|-------------|--|
| Received | | Officer | |
| Fees Paid | | DG Number | |
| GL Code 30300404 | | Refund Date | |

| REFUND CLAIMED | | | | |
|-----------------------|-------------------|---------------------|------------------|---------------------------------------|
| Month of Registration | Working Dogs (\$) | Good Dog Owner (\$) | Non Working (\$) | Neutered/Spayed Non Working Dogs (\$) |
| July | 56.00 | 77.00 | 165.00 | 110.00 |
| August | 51.00 | 71.00 | 151.00 | 101.00 |
| September | 47.00 | 64.00 | 138.00 | 92.00 |
| October | 42.00 | 68.00 | 124.00 | 83.00 |
| November | 37.00 | 58.00 | 110.00 | 73.00 |
| December | 33.00 | 45.00 | 96.00 | 64.00 |
| January | 28.00 | 39.00 | 83.00 | 55.00 |
| February | 23.00 | 32.00 | 69.00 | 46.00 |
| March | 19.00 | 26.00 | 55.00 | 37.00 |
| April | 14.00 | 19.00 | 41.00 | 28.00 |
| May | 9.00 | 13.00 | 28.00 | 18.00 |
| June | Nil | | | |