

Transiting Animal Permit Request Form

Applicant Information Full Name: City: ______ State: _____ Postcode: _____ Phone Number: _____ Email Address: _____ **Animal Information** Microchip Number: Age: _____ Weight: ____ **Flight Information** Airline: _____ Flight Number: _____ Arrival: **Onward Travel** Same Day Travel by: Ferry \Box | Aircraft \Box | Private Vessel \Box Time: _____ Requested Start Date: **Declaration** I declare that the information provided in this form is true and correct to the best of my knowledge. I understand that approval of this request is subject to review and compliance with applicable regulations.

Signature Please return the completed form for Transiting Animal Permit Request to civilservices@hamiltonisland.com.au

Civil Services Approval

Full Name

Generally, the type of personal information we collect about you is the information that is needed in relation to your dog and travel plans. For example, we may collect details such as your name, residential address, mailing address, telephone number and email address. By proceeding you agree with the terms set out in the applicable Hamilton Island's Privacy Policy available at: https://www.hamiltonisland.com.au/general-business-privacy-policy

Date