

## APPLICATION FOR VERIFICATION OF TITLES AND CLASSIFICATION FOR IMPORTED ANIMALS/SEMEN

**PLEASE COMPLETE IN BLOCK LETTERS**

Name of Dog: \_\_\_\_\_ Verification of : \_\_\_\_\_  
 Registration Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Microchip Number: \_\_\_\_\_ Tattoo Number: \_\_\_\_\_  
 Sire: \_\_\_\_\_  
 Dam: \_\_\_\_\_  
 HD grading /score: \_\_\_\_\_ Date HD Grading: \_\_\_\_\_  
 ED grading /score: \_\_\_\_\_ Date ED Grading: \_\_\_\_\_  
 Breed Survey Status: \_\_\_\_\_ Country of Survey: \_\_\_\_\_  
 Date of Survey: \_\_\_\_\_ Surveyed for Life: YES NO  
 Surveyor: \_\_\_\_\_ Variety: \_\_\_\_\_  
 Breeder Name: \_\_\_\_\_  
 Breeder Address: \_\_\_\_\_  
 Purchased or Leased from: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Date of transfer: \_\_\_\_\_ Released from quarantine: Month Year

**Working Titles (Tick applicable and provide detail where required)**

Date attained:	Date attained:	Judges Name:
BH: _____	IPO1/SchH1: _____	
AD: _____	IPO2/SchH1: _____	
	IPO3/SchH1: _____	

Other titles give details: \_\_\_\_\_

I hereby declare that the information listed above is true and correct to the best of my knowledge. I also consent for the GSDCA to verify the titles and classifications with the controlling body of the country where these titles/classifications were issued. As per Regulation 3.6.3.3 or 3.6.4.3 a copy of the following documents **MUST** be included with this form to substantiate above:

1. Original pedigree
2. Breed Survey
3. HD/ED Results
4. Title certificates

**Signature of owner/s** ..... **Date:** .....

Full name of new owner: \_\_\_\_\_ Contact Telephone: \_\_\_\_\_  
 Address of new owner: \_\_\_\_\_  
 Email address: \_\_\_\_\_

The verification will be processed once payment is received. Please retain a copy of this form for Taxation purposes.

**TAX INVOICE**  
**GERMAN SHEPHERD DOG COUNCIL OF AUSTRALIA ABN 25 515 310 063**

**PAYMENT \$25 (GST Inc):** EFT, Credit Card or Cheque. Please save the form to your computer, complete on line, print and sign. Scan the form, along with supporting documentation, and email to [verification@gsdcouncilaustralia.org](mailto:verification@gsdcouncilaustralia.org).

If paying by Cheque please send with the completed form to Mrs Jenny Delucia, Verification Officer, 45 Barkley Drive, Gawler Belt SA 5118.

**EFT details:** Westpac Bank Account Name: GSDCA BSB No: 035 034 Account No: 401558. Please use your surname as a reference.

**CREDIT CARD PAYMENTS:**

VISA Mastercard Card number: \_\_\_\_\_ Exp Date: \_\_\_\_ / \_\_\_\_  
 Name as shown on Credit Card: \_\_\_\_\_ CVN (3 digit number on reverse side of Credit Card)