

Assistance dog approvals  
Policy and application form

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# Assistance dog approvals policy

## Relationship to *Disability Discrimination Act 1992*

* 1. The Commonwealth *Disability Discrimination Act 1992* (DDA 1992) makes it unlawful to discriminate against a person with a disability who has an assistance animal, subject to certain exemptions.
  2. Section 9(2) of the *DDA 1992* identifies an assistance animal as:

For the purposes of this Act, an ***assistance animal*** is a dog or other animal:

1. accredited under a law of a State or Territory that provides for the accreditation of animals trained to assist a persons with a disability to alleviate the effect of the disability; or
2. accredited by an animal training organisation prescribed by the regulations for the purposes of this paragraph; or
3. trained:

(i)  to assist a person with a disability to alleviate the effect of the disability; and

(ii)  to meet standards of hygiene and behaviour that are appropriate for an animal in a public place.

* 1. Section 54A of that Act sets out the exemptions to that right of access.

**54A  Assistance animals**

(1)  This section applies in relation to a person with a disability who has an assistance animal.

(2)  This Part does not render it unlawful for a person to request or to require that the assistance animal remain under the control of:

(a)  the person with the disability; or

(b)  another person on behalf of the person with the disability.

(3)  For the purposes of subsection (2), an assistance animal may be under the control of a person even if it is not under the person’s direct physical control.

(4)  This Part does not render it unlawful for a person (the ***discriminator***) to discriminate against the person with the disability on the ground of the disability, if:

(a)  the discriminator reasonably suspects that the assistance animal has an infectious disease; and

(b)  the discrimination is reasonably necessary to protect public health or the health of other animals.

(5)  This Part does not render it unlawful for a person to request the person with the disability to produce evidence that:

(a)  the animal is an assistance animal; or

(b)  the animal is trained to meet standards of hygiene and behaviour that are appropriate for an animal in a public place.

(6)  This Part does not render it unlawful for a person (the ***discriminator***) to discriminate against the person with the disability on the ground that the person with the disability has the assistance animal, if:

(a)  the discriminator requests or requires the person with the disability to produce evidence referred to in subsection (5); and

(b)  the person with the disability neither:

(i)  produces evidence that the animal is an assistance animal; nor

(ii)  produces evidence that the animal is trained to meet standards of hygiene and behaviour that are appropriate for an animal in a public place.

(7)  This Part does not affect the liability of a person for damage to property caused by an assistance animal.

* 1. The Department of Local Government, Sport and Cultural Industries provides an accreditation system for assistance animals in Western Australia under the provisions of the *Dog Act 1976*, with the authorisation card that is issued providing evidence that the dog is “accredited under a law of a State or Territory that provides for the accreditation of animals trained to assist a persons with a disability to alleviate the effect of the disability”.
  2. This policy outlines the requirements and process for gaining such an accreditation.

## Dogs approved in different jurisdiction

* 1. A dog which has been accredited under another law of a State or Territory has public access rights in Western Australia.
  2. If the handler intends to reside in Western Australia for an extended period of time or permanently, the handler should provide evidence of the approval to the Chief Executive Officer (CEO). If satisfied with the evidence provided, the CEO can grant a Western Australian authorisation card.

## Policy

* 1. The Department of Local Government, Sport and Cultural Industries (DLGSC) shall provide a fair and unbiased assessment of all applications made under section 8(4) of the *Dog Act 1976*.
  2. All applications will be considered on a case by case basis.
  3. A dog which is registered with the relevant local government pursuant to the *Dog Act 1976* may be considered for an Assistance Dog approval. However a dog that is a dangerous dog under Part VI, Division 2 of the *Dog Act 1976* because it has been declared a dangerous dog by a local government, or is a dangerous dog (restricted breed) or a commercial security dog, will not be eligible for an approval.
  4. A dog will generally not be considered for approval unless it is at least one year of age, subject to the discretion of the CEO.
  5. In assessing an application, DLGSC shall consider the safety of Public Transport Authority employees and the safety and comfort of members of the public.
  6. The two types of Assistance Dog approvals that may be granted are a Probationary Assistance Dog Approval or a Full Assistance Dog Approval.
  7. All applicants must obtain a Probationary Assistance Dog Approval before being considered for a Full Assistance Dog Approval unless determined otherwise by the CEO.

## Definitions

* 1. **Application Form** – means the application form for a Full Assistance Dog Approval or Renewal.
  2. **Assistance Dog** – means any dog that has been approved by the CEO as provided for in section 8(4) of the *Dog Act 1976*, which has been specifically trained to assist a person with a disability to alleviate the effect of the disability and meets the standards of hygiene and behaviour that are appropriate for a dog in a public place.
  3. **Authorisation Card** – means an authorisation card given when an Assistance Dog Approval has been granted.
  4. **Authorised Person** – means a person who is in charge of or has authority over a public place or public transport.
  5. **BOA** – means a Behaviour and Obedience Assessment undertaken by an Independent Public Access Test Assessor to determine if a dog displays the appropriate behaviour suitable for public access on a probationary basis.
  6. **Cardholder** – means a person who is issued with the Assistance Dog authorisation card.
  7. **CEO** – means the Director General of the Department of Local Government, Sport and Cultural Industries.
  8. **DLGSC –** means the Department of Local Government, Sport and Cultural Industries.
  9. **Full Assistance Dog Approval** – means an Assistance Dog approval granted to a dog who has successfully completed a PAT.
  10. **Independent Public Access Test Assessor** – means an assessor who has been approved by the CEO.
  11. **Probationary Assistance Dog Application Form** – means the application form to apply for a Probationary Assistance Dog Approval.
  12. **Probationary Assistance Dog Approval** – means an approval granted to a dog which has completed a BOA.
  13. **PAT** – means a Public Access Test administered by an Independent Public Access Test Assessor to assess whether a dog meets the standards of behaviour that are appropriate for a dog in a public place.
  14. **Suspension period** – means a period of time where a card is suspended to account for a change in Cardholder/Assistance Dog circumstances, or as a result of a breach of any condition of this Policy or conditions imposed on the grant of the approval.

## Approvals

* 1. All applications for Assistance dogs must include the following:

1. An electronic copy of an easily identifiable head photograph of the dog;
2. An electronic copy of an easily identifiable head photograph of the owner/handler;
3. The name of the person who will be handling the dog;
4. If the dog is for a person under 18 years of age, a parent or guardian must also be named as a handler;
5. Supporting evidence from an Independent Public Access Test Assessor that the dog has undertaken a BOA or PAT;
6. a Disability Declaration by a Medical Practitioner in accordance with the relevant application form confirming the person’s disability and how the dog will alleviate the effects of that disability;
7. a Veterinarian’s Declaration in accordance with the relevant application form; and
8. Written evidence from the relevant local government that the dog has been registered and microchipped.
   1. All supporting documentation will be current and not dated further back than one month from the submission date of the application.
   2. Where an application is not in the correct form or lacks required information, the DLGSC will attempt to work with the applicant to rectify any defect prior to advising the CEO to reject an application.

## Conditions

### General

* 1. Additional conditions and limitations may be placed on any approval at any time, at the discretion of the CEO.
  2. An Assistance Dog approval may be amended or revoked at any time by the CEO. All effort will be made to work with the cardholder before an approval is revoked.
  3. A person can only have one approved Assistance Dog at any time.
  4. An Assistance Dog approval is applicable in Western Australia (WA). The approval itself may not provide public access rights in any other State or Territory and is not provided for that purpose.
  5. Approval will provide the dog and named handler, access to any building or place open to or used by the public, for any purpose, or in any public transport.
  6. Following an approval, the photograph of the dog and handler will be   
     placed onto an authorisation card which must be carried on the named handler at all times when in public places with the Assistance Dog. If requested, new photos must be submitted to DLGSC if deemed necessary for identification purposes.
  7. Assistance dogs must be clearly identified by a suitably marked Assistance Dog coat or harness.
  8. An Assistance Dog that only has a collar and lead is not deemed as being clearly identified.
  9. Access may be refused to a public area or public transport if:

1. An Authorised Person cannot properly identify the dog or named person;
2. there is a belief that the dog has an infectious disease which could likely jeopardise public health or the health of other animals (S54A(4) DDA 1992);
3. the dog displays behaviour that breaches the standards of behaviour required of an Assistance Dog;
4. it is reasonably necessary to protect public health or health of other animals. (S54A(5) DDA 1992); or
5. another law of the State or Commonwealth prohibits the dog from being present in a public place or area.
   1. An Assistance Dog approval does not guarantee access to cabin travel for an assistance dog on airlines. Each airline has their own policy and applicants are expected to discuss air travel with the relevant carrier at the time of making travel arrangements.
   2. An Assistance Dog approval does not exempt a dog from any leash requirements imposed under the *Dog Act 1976*.

### Probationary Assistance Dog Approval

* 1. A Probationary Assistance Dog Approval may be granted when a dog has undertaken and passed a BOA.
  2. An authorisation card for a Probationary Assistance Dog Approval will be valid for six months from the date of issue, with an extension of time only being granted at the discretion of the CEO, subject to the satisfaction of any conditions given with the approval.
  3. A Cardholder who is the subject of a Probationary Assistance Dog Approval will be subject to the following conditions:

1. the requirement to undertake and pass a PAT before the completion of the six month period;
2. the requirement to maintain a record outlining all training the dog undertook and any difficulties faced during the 6 month period;
3. the requirement to notify DLGSC of a change in circumstances likely to interrupt the training or use of the dog during the 6 month period (i.e. Cardholder or Assistance Dog suffers an injury, health complication, travelling interstate or overseas) and any circumstances that differ from those first considered when granting approval.
   1. A failure to satisfy any condition during a probationary period may cause an authorisation card to be revoked, suspended or the assessment of a Full Assistance Dog Approval at the completion of a probationary period to be jeopardised.
   2. To provide continuation of coverage, a Cardholder who is the subject of a Probationary Assistance Dog Approval must complete and submit to DLGSC an “Assistance Dog Renewal Application Form” no later than two weeks before their authorisation card expires to enable an assessment of eligibility to receive a Full Assistance Dog Approval.

### Full Assistance Dog Approval

* 1. Subject to the discretion of the CEO, an applicant must obtain a Probationary Assistance Dog Approval prior to being eligible for a Full Assistance Dog Approval.
  2. An authorisation card for a Full Assistance Dog Approval will be valid for two years, or as otherwise specified at the time of approval.
  3. If an application is made for a Full Assistance Dog Approval and it is not granted, all public access rights granted under a Probationary Assistance Dog Approval will cease. Resubmission of a rejected application can be made at the discretion of the CEO.

### Suspension period

* 1. A suspension period may apply during a Probationary Assistance Dog Approval if there has been a change in circumstances of a Cardholder/Assistance Dog that requires public access rights to be temporarily suspended.
  2. A suspension period may be voluntarily implemented by a Cardholder (or guardian/agent of the Cardholder on their behalf) or determined by the CEO.
  3. The decision for a probationary period to recommence after a suspension period will be made at the discretion of the CEO.
  4. If a Probationary Assistance Dog Approval is recommenced after a period of suspension, a new card will be issued to the Cardholder.

### Authorisation cards

* 1. The cardholder should report any loss or illegibility of an authorisation card to DLGSC immediately, so a replacement can be arranged. An authorisation card must be on the person granted approval at all times when in public places or in public transport with the Assistance Dog. Without an authorisation card, a person may not be granted public access rights.
  2. If an authorisation card is revoked or suspended, it is no longer valid and is cancelled effective immediately from the date of revocation or suspension. An Authorised Person may enquire as to whether a card is currently revoked or suspended.
  3. A revoked or suspended card must be returned to DLGSC within 2 weeks of the notice of revocation or suspension.

### Renewing an authorisation card

* 1. A renewal of an authorisation card can only be obtained if an “Assistance Dog Renewal Application Form” is completed and submitted to DLGSC.
  2. A renewal form is to be submitted no later than two weeks prior to the expiration of an authorisation card to facilitate continuity of coverage.
  3. Public access rights granted by the DLGSC will be suspended if an assessment of a renewal form is still being undertaken after the expiration of an authorisation card, though these access rights will reactivate if the renewal is approved.
  4. An authorisation card that is renewed will be valid for the period of time determined by the CEO.
  5. A renewal will be for a period of two years, or at the discretion of the CEO, any length of time up to a maximum of five years.
  6. In determining the length of a renewal period, the CEO will have regard to:

(a) the age of the dog;

(b) the particular assistance tasks that the dog is required to provide;

(c) previous BOA and PAT results; and

(d) any other circumstances which may be relevant.

**For more information, please contact:**

Department of Local Government, Sport and Cultural Industries

Postal Address: GPO Box R1250, Perth, WA, 6844

Telephone: (08) 6551 8700

Fax: (08) 6552 1555

Email: [legislation@dlgsc.wa.gov.au](mailto:legislation@dlgc.wa.gov.au)

Web: [www.dlgsc.wa.gov.au](http://www.dlgc.wa.gov.au/)

# Assistance dog application information

## How to complete the application form

1. Either the applicant and/or guardian/agent are to complete Parts 1, 2 and 5.
2. The applicant’s Medical Practitioner is to complete Part 3.
3. The applicant’s Veterinarian is to complete Part 4.
4. All parts of the application form and relevant supporting documents (including electronic photos) are to be submitted to:

**Assistance Dog Applications**

Department of Local Government, Sport and Cultural Industries  
GPO Box R1250  
PERTH WA 6844  
Email: [legislation@dlgsc.wa.gov.au](mailto:info@dlgc.wa.gov.au)

If you have any further queries about the application or the approval process you can contact the Department by phone on (08) 6551 8700 or via the email address above.

**Please note that:**

* Any incorrect or misleading statement in this application may result in the immediate cancellation of any Assistance Dog approval.
* Original applications and photographs cannot be returned under any circumstances.
* Incomplete applications, including those without signatures, cannot be processed.
* If successful in qualifying for an Assistance Dog authorisation card, your card will be posted to you.

# Cardholder terms and conditions

**The following terms and conditions apply:**

* An Assistance Dog approval allows any dog approved under section 8(4) of the *Dog Act 1976* to enter any building or place open to or used by the public, for any purpose, or in any public transport. This is subject to any other law of the State or Commonwealth that may prohibit the dog from being present in a certain public place or area.
* The Cardholder must carry their Assistance Dog authorisation card with them at all times when in a public place accompanied by an Assistance Dog and the card must be produced if requested by an Authorised Person.
* The Assistance Dog must be suitable for travelling on public transport, which can be over a long distance with extended travel times. At all times, the Assistance Dog shall be under the control of the Cardholder.
* The Cardholder must understand that trains, buses, coaches, shopping centres and other public places could be crowded and noisy for a dog, and the Assistance Dog must be able to cope with these movements and noise.
* The Cardholder will be responsible for any injury, loss or damage however caused, or contributed to, by the Assistance Dog at any building, place or in any form of public transport.
* The Cardholder must ensure that the dog remains on a leash whenever required by law.

**Approved assistance dogs, when in a public building, place or transport,   
must not:**

* Cause distress or inconvenience to other people by its actions or behaviour;
* Cause any risk to the health, safety and welfare of any person;
* Lunge at or bite any person or animal;
* Disrupt the operations of services;
* Sit on seats or restrict access to services provided;
* Block doorways or aisles;
* Toilet on seats, service areas or in premises or in public transport.

# Assistance dog application

## Part 1 – Applicant’s information

To be completed by applicant or guardian.

| **Applicant/guardian:** | | | |
| --- | --- | --- | --- |
| Title: | [Click here to enter text.] | | |
| Given name(s): | [Click here to enter text.] | | |
| Surname: | [Click here to enter text.] | | |
| Gender: | [Click here to enter text.] | Date of Birth: | [Enter text.] |
| Telephone: | [Click here to enter text.] | | |
| Email: | [Click here to enter text.] | | |
| Residential address: | [Click here to enter text.] | | |
| Suburb: | [Click here to enter text.] | | |
| State: | [Click here to enter text.] | Postcode: | [Enter text.] |
| Postal address (if different): | [Click here to enter text.] | | |
| Suburb: | [Click here to enter text.] | | |
| State: | [Click here to enter text.] | Postcode: | [Enter text.] |

|  |
| --- |
| **Please tick the boxes that best describe your disability.** We have provided some examples of disability to assist you. (You can tick more than one box.) |
| **Physical** (Eg. muscular dystrophy, quadriplegia, cerebral palsy)  Description: [Click here to enter text.] |
| **Sensory** (Eg. deaf, blind)  Description: [Click here to enter text.] |
| **Intellectual** (Eg: down syndrome, rhett syndrome)  Description: [Click here to enter text.] |
| **Neurological** (Eg. alzheimer’s disease, huntington’s disease)  Description: [Click here to enter text.] |
| **Acquired Brain Injury** (Eg: stroke, head injury)  Description: [Click here to enter text.] |
| **Psychiatric** (Eg: schizophrenia)  Description: [Click here to enter text.] |
| **Other**  Description: [Click here to enter text.] |
| How does the dog assist with alleviating the effect of your disability? Please note: the dog must be needed to alleviate the effect of your disability, not just provide companionship. |
| [Click here to enter text.] |

## Part 2 – Dog information and training

To be completed by the applicant, guardian or agent.

|  |  |  |  |
| --- | --- | --- | --- |
| **What is the dog’s name?** | | | |
| [Click here to enter text.] | | | |
| **Part 1 – Completion of a Behaviour and Obedience Assessment (BOA) or Public Access Test (PAT)** | | | |
| **Has your dog successfully completed a BOA or PAT?**  Please contact DLGSC for further advice before completing the rest of this form if a BOA or PAT has not been completed. | | | |
| **BOA**  **PAT**  Please provide the details of the Independent Public Access Test Assessor who has conducted the assessment and ask them to provide a copy of the completed assessment to the Department. | | | |
| Independent Public Access Test Assessor Name: | [Click here to enter text.] | | |
| Telephone: | [Click here to enter text.] | | |
| Email: | [Click here to enter text.] | | |
| Address: | [Click here to enter text.] | | |
| Suburb: | [Click here to enter text.] | | |
| State: | [Click here to enter text.] | Postcode: | [Enter text.] |

**Part 2 – Registration and Microchipping Details**

Please provide evidence that the dog is microchipped and registered in the local government where you ordinarily live. This can be in the form of a formal letter, email or the relevant registration papers. If your dog is registered in another State or Territory, please contact the DLGSC for further guidence.

## Part 3 – Disability declaration

To be completed by the applicant’s Medical Practitioner.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Medical Practitioner:** | | | | | |
| Full Name: | [Click here to enter text.] | | | | |
| Name of Medical Practice: | [Click here to enter text.] | | | | |
| Qualification: | [Click here to enter text.] | | | | |
| Telephone: | [Click here to enter text.] | | | | |
| Email: | [Click here to enter text.] | | | | |
| Address: | [Click here to enter text.] | | | | |
| Suburb: | [Click here to enter text.] | | | | |
| State: | [Click here to enter text.] | | Postcode: | | [Enter text.] |
| **I have seen the applicant in a professional capacity for:** | | | | | |
| Years: | [Enter text.] | Months: | | [Enter text.] | |
| **Please outline the nature of the applicant’s disability/disabilities.** | | | | | |
| [Click here to enter text.] | | | | | |

**Is the applicant mentally competent and stable to have an assistance dog and control it in a public place?**

Yes  No

|  |  |  |  |
| --- | --- | --- | --- |
| **Please provide details of the functional impact of the applicant’s disability/disabilities:** | | | |
| [Click here to enter text.] | | | |
| **In your opinion, does the applicant require an Assistance Dog to alleviate the effects of their disability? Yes  No**  **The assistance that would be provided by the Assistance Dog is:** | | | |
| [Click here to enter text.] | | | |
| **Is there a need for the applicant to have an assistance dog in public places, such as shopping centres and public transport, for it to alleviate the effects of their disability?**  Yes  No  **If yes, what assistance will it provide?** | | | |
| [Click here to enter text.] | | | |
| **The period that the applicant is likely to require the support of an Assistance Dog to alleviate their disability is:** | | | |
| [Click here to enter text.] | | | |
| My signature below confirms all of the following (please tick): | | | |
| I have read all the relevant information contained within this form and verify that it is correct to the best of my knowledge;  I am not the applicant, or an immediate family member of the applicant;  I am the applicant’s Medical Practitioner; and  I agree to provide all reasonable information to the Department of Local Government, Sport and Cultural Industries to assist with the assessment of the Assistance Dog application to determine the applicant’s eligibility, if required. | | | |
| Signature: |  | Date: |  |

# 

## Part 4 – Veterinarian’s declaration

To be completed by a registered Veterinarian.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Registered Veterinarian:** | | | | | | |
| Full Name: | | [Click here to enter text.] | | | | |
| Name of Veterinarian Practice: | | [Click here to enter text.] | | | | |
| Position: | | [Click here to enter text.] | | | | |
| Telephone: | | [Click here to enter text.] | | | | |
| Email: | | [Click here to enter text.] | | | | |
| Address: | | [Click here to enter text.] | | | | |
| Suburb: | | [Click here to enter text.] | | | | |
| State: | | [Click here to enter text.] | | Postcode: | | [Enter text.] |
| **My signature below confirms all of the following as far as can be reasonably determined during a standard examination (please tick):** | | | | | | |
| The dog displays standards of hygiene that are appropriate for a public place and premises, and in public transport.  The dog is of good health and has no infectious diseases.  The dog responds to control and obedience commands. | | | | | | |
| Signature: |  | | Date: | |  | |

## Part 5 – Applicant’s declaration and statement

In consideration of being granted an authorisation card for my dog to be allowed into any building or place open to or used by the public, for any purpose, or in any public transport, for the period indicated on the authorisation card under the provisions of the *Dog Act 1976*, I agree to and acknowledge the following (please tick):

|  |  |  |  |
| --- | --- | --- | --- |
| I certify that to the best of my knowledge the information in this application is accurate;  Individual photos of the applicant and the dog are attached;  I have an ongoing disability which could be alleviated when in public places by an Assistance Dog;  I agree that the Veterinarian, Medical Practitioner or Independent Public Access Test Assessor may disclose any information relating to this application to DLGSC to assist with its assessment;  I have confirmed with the Independent Public Access Test Assessor with whom I undertook a BOA that they have provided the assessment to DLGSC;  I acknowledge that further information may be requested by DLGSC to enable assessment of this application; and  I understand and accept all Conditions of the Policy and the Cardholder Terms and Conditions. | | | |
| **Applicant’s Signature:** | | | |
| Signature: |  | Date: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Agent’s signature** (if another person completed this form on applicant’s behalf)**:** | | | |
| Full Name: | [Click here to enter text.] | | |
| Telephone: | [Click here to enter text.] | | |
| Email: | [Click here to enter text.] | | |
| Relationship to Applicant: | [Click here to enter text.] | | |
| Signature: |  | Date: |  |
| **Legal guardian’s signature** (if applicant is under 18 years of age)**:** | | | |
| Full Name: | [Click here to enter text.] | | |
| Telephone: | [Click here to enter text.] | | |
| Email: | [Click here to enter text.] | | |
| Relationship to Applicant: | [Click here to enter text.] | | |
| Signature: |  | Date: |  |

**Please submit this form by post to:**

Assistance Dog Applications

Department of Local Government, Sport and Cultural Industries

GPO Box 8349 Perth Business Centre WA 6849

**Or electronically to:**

Fax: (08) 6552 1555

Email: [legislation@dlgsc.wa.gov.au](mailto:legislation@dlgsc.wa.gov.au)