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|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. | | | | | | | | | | | | | | | | | | | | | | | |
| To: Registrar LISA / Brands Clerk  GPO Box 3000 Phone: 08 8999 2033  Darwin NT 0801 Email: [adele.kluth@nt.gov.au](mailto:adele.kluth@nt.gov.au) | | | | | | | | | | | | | | | | | | | | | | | | |
| We the undersigned being the registered owner/s and intended transferee, respectively, of the Brands and Earmark mentioned hereunder, do hereby request that you transfer the said Brands and Earmark: | | | | | | | | | | | | | | | | | | | | | | | | |
| Particulars of Brands and Earmark | | | | | | | | | | | | | | | | | | | | | | | | |
| **Three letter brand** | | | | **Distinctive brand** | | | | | | | **Distinctive numeral/s** | | | | | | | **Earmark code and position** | | | **Branding position** | | | |
|  | | | |  | | | | | | |  | | | | | | |  | | | Cattle: Horses: | | | |
| **Brand currently registered to:** | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Transfer Brand to (new owners):** | | | | | | | | |  | | | | | | | | | | | | | | | |
| **Run where Brand will be used:** | | | | | | | | |  | | | | | | | | | | | | | | | |
| Contact details | | | | | | | | | | | | | | | | | | | | | | | | |
| Postal address of applicants: | | | | | | | |  | | | | | | | | | | | | | | | | |
| Telephone: | |  | | | | | | | | | | | **Fax:** | | |  | | | | | | | | |
| Mobile: | |  | | | | | | | | | | | **Email:** | | |  | | | | | | | | |
| Dated this: | |  | | | | | | | | | | | **day of:** | | |  | | | | | | | **20** | |
| Signatures | | | | | | | | | | | | | | | | | | | | | | | | |
| **Transferor (old owners)** | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signatures:** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Print name/s:** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Position title.** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Witness signature:** | | | | |  | | | | | | | | | | **Witness name:** | | | |  | | | | | |
| **Transferee (new owners)** – I / We hereby acknowledge that we are over the age of 18 years old | | | | | | | | | | | | | | | | | | | | | | | | |
| **Signatures:** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Print name/s:** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Position title.** | | | 1. | | | | | | | | | 2. | | | | | 3. | | | | 4. | | | |
| **Witness signature:** | | | | |  | | | | | | | | | | **Witness name:** | | | |  | | | | | |
| **Payment** | | | | | | | | | | | | | | | | | | | | | | | | |
| Application for Transfer of Brand – Note Fees subject to change 1st July each year | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payment type:** | | | $63 CHEQUE attached (made payable to RTM) | | | | | | | | | | | | | | | | Please charge my Credit Card $63 | | | | | |
| B/CARD / M/CARD / VISA | | | | | | | **Card number:** | | | \_ \_ \_ \_/\_ \_ \_ \_/ \_ \_ \_ \_ /\_ \_ \_ \_ | | | | | | | | | **Expiry:** | \_ \_/\_ \_ | | **CCV:** | | \_ \_ \_ |
| **Name on credit card:** | | | | | |  | | | | | | | | **Signature**: | | | | | |  | | | | |
| **Office use only** | | | | | | | | | | | | | | | | | | | | | | | | |
| LISA / Brands, Livestock Biosecurity, BAW, DITT – Cost Code: **92HF1N03D**134535 N00 = no GST | | | | | | | | | | | | | | | | | | | | | | | | |
| End of form | | | | | | | | | | | | | | | | | | | | | | | | |