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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) | | | | | | | | | | | | | | | |
| I / We | |  | | | | | | | | | | | | | |
| The registered owner/s of the registered three-letter brand as describe below, advise that I cannot locate / have misplace the original certificate/s (please tick): | | | | | | | | | | | | | | | |
| Certificate of registration of three-letter Brand (which includes certificate of registration of Earmark and /or certificate of registration of Distinctive Brand) or Certificate of Transfer of Brand | | | | | | | | | | | | | | | |
| Would you please issue me with a **Replacement Certificate** (which includes the associated Earmark and / or Distinctive Brand) at your earliest convenience. Details are as follows: | | | | | | | | | | | | | | | |
| Brand Registration details | | | | | | | | | | | | | | | |
| **Three-letter brand registered:** | | | | | | |  | | | | | | | | |
| **Distinctive (symbol) brand:** | | | | | | |  | | | | | | | | |
| **Registered Earmark (code and position):** | | | | | | |  | | | | | | | | |
| **Branding position/s :** | | | | | | | **Cattle:** | |  | | | | **Horses:** | |  |
| **Run where Brand is registered for use (branding iron used):** | | | | | | |  | | | | | | | | |
| Contact details | | | | | | | | | | | | | | | |
| Postal address of applicant/s: | | | | |  | | | | | | | | | | |
| Telephone: | | | |  | | | | Mobile**:** | |  | | | | | |
| **Email**: | | | |  | | | | | | | | | | | |
| All registered owner/s of brand to sign | | | | | | | | | | | | | | | |
| **Registered Owner 1** – I am over the age of 18 years | | | | | | | | | | | | | | | |
| Print Name in full | | |  | | | | | | | | Position Title | | |  | |
| **Signature:** | | |  | | | | | | | | **Date:** | | | / /20 | |
| **Registered Owner 2** – I am over the age of 18 years | | | | | | | | | | | | | | | |
| Print Name in full | | |  | | | | | | | | Position Title**:** | | |  | |
| **Signature:** | | |  | | | | | | | | **Date:** | | | / /20 | |
| **Registered Owner 3** – I am over the age of 18 years | | | | | | | | | | | | | | | |
| Print Name in full | | |  | | | | | | | | Position Title**:** | | |  | |
| **Signature:** | | |  | | | | | | | | **Date:** | | | / /20 | |
| **Payment Instructions** | | | | | | | | | | | | | | | |
| *Issue Replacement Certificate* $63 Note Fees subject to change 1st July each year | | | | | | | | | | | | | | | |
| **Cheques**  Must be made out to RTM (Receiver of Territory Monies) and can be posted to:  Brands Clerk, DITT,  GPO Box 3000,  Darwin NT 0801 | | | | | | **Cash/Debit Card**  Payments may only be made in person at the RTM locations below.  Please present this form. | | | | | | **Credit Card** payments may be made during business hours (8:30am – 4:00pm, Mon-Fri)  **In person** – Present this form at one of the RTM locations listed below.  **By Phone** – Contact one of the RTM locations listed below | | | |
| **RTM Darwin** | | | | | | **RTM Katherine** | | | | | | **RTM Alice Springs** | | | |
| Ground floor,  Manunda Place  38 Cavenagh Street  Darwin NT 0830  RTM  GPO Box 199  Darwin NT 0801  RTMDarwin@nt.gov.au  08 8999 1628 | 08 8999 1606 | | | | | | Counter 8, Ground Floor,  Big River Government Centre  5 First Street,  Katherine NT 0850  RTM  PO Box 4037  Alice Springs NT 0871  RTMKatherine@nt.gov.au  08 8951 6481 | | | | | | 1st Floor,  Alice Springs Plaza  Todd Street Mall  Alice Springs NT 0870  RTM  PO Box 4037  Alice Springs NT 0871  RTMAlice@nt.gov.au  08 8951 6491 | | | |
| **NTG Office Use only** | | | | | | | | | | | | | | | |
| *Issue Replacement Certificate* $63  Cost Code: **92HF1N03D** Standard Class: 131111 Tax Code: N00 = no GST  RTM – Please send original receipt to customer and email a copy of this Application & Receipt to: [adele.kluth@nt.gov.au](mailto:adele.kluth@nt.gov.au) | | | | | | | | | | | | | | | |