

**Licensing Department** 14 Hasler Rd OSBORNE PARK WA 6017 Telephone 08 9445 5558

Email: licregreturns@rwwa.com.au

## **CHANGE OF STABLE ADDRESS**

**NO FEE** 

DETAILS-PLEASECOMPLETE MR/MRS/MISS/MS						
Surname:	Given Names:					
License No:						
New Stable Address:						
Contact number:	Home:		Mobile:			
Email Address:						
Lease Agreement (if applicable please attach):						
Name of Property Owner:						
Names of any other Stable Trainers or Property Users:						
Date of Relocation:						
Stable Employees Names:						
Further Comments:						
Trainers Declaration: I hereby declare that all the above particulars are true and correct. I acknowledge that approval is required by Stewards prior to any relocation of horses trained as per HR 119C(1) and AR 101 and that a Stable Inspection will be carried out by Authorised RWWA officials.						
APPLICANT'S SIGNATURE:		DATE:				