Application to Registration of Prescribed Accommodation Premises

Public Health and Wellbeing Act 2008



Nillumbik Shire Council Tel: 03 9433 3340 www.nillumbik.vic.gov.au Council use only Receipt number: Application date: Lodgement date:

Fields marked with an asterisk (*) are mandatory and must be completed.

Applicant details						
Proprietor						
Title* Surname*		Given Name 1*		Given Name 2		
ABN	ACN					
Business Name		Company Nar	ne			
Address		П	<u> </u>	□		
PO Box GPO Box C	Private Bag	Locked Bag	RMB	RSD		
Street Address/ Postal Address*						
Suburb / Town*		State *	Postcode	*		
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Please provide at least one phone numb	per and include the	area code *				
Business Phone After hours		Business Fax		Mobile		
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` Email				,		
Proprietor 2 (if applicable)						
Title Surname	1	Given Name 1		Given Name 2		
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Business Name		Company Nar	ne			
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Email Contact details (if different from above) If same as proprietor leave details blank Title Sumame Given Name 1* Given Name 2 Address PO Box PO Box Private Bag Locked Bag RMB RSD Street Address/ Postal Address Suburb / Town State Postcode Business Phone After hours phone Business Fax Mobile () () () () () () () () () (()	After hours phone	Business Fax	Mobile
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Supporting documents								
Payment details								
The fee to register a prescribed accommodation premises is dependent on the number of beds								
Fee:								
<10 beds \$290.00	10 - 20 beds \$470.00	>20 beds \$ 60	00.00					
	Decla	aration						
- This application forms a lega - I am over 18 years at the tim	e that: this application is true and comple document and penalties exist fo e of completing this application I confirm that I have read and und	r providing false or mis	nowledge sleading information					
statements above *								
Name of person completin	g this application *		Date *					
Signature of person completing this application *								
ı								
	Privacy	statement						
The information gathered in the fo Council's offices or go to Council F	rm is used by Council to process t Privacy statement located at: www	he application. To viev .nillumbik.vic.gov.au	w Council's privacy policy	please either visit				
	Lodg	ement						
If you intend to post or fax this forn	n please use the details provided	below:						
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Nillumbik Shire Council		Telepho	one: 03 94333340					
PO Box 476		•	ax: 03 9433 3777					
Greensborough VIC 308	8	Email: info@nil	llumbik.vic.gov.au					
G 1111		•	llumbik.vic.gov.au					
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