

REGULATED HEALTH PREMISES REGISTRATION APPLICATION FORM

PART 1: PREMISES DETAILS

Trading Name								
SHC	OP NUMBER	Building/Arcadi	 E					
Adi	DRESS							
Pos	STAL ADDRESS (IF DIFFE	 ERENT FROM ABOVE)						
PHO	ONE NUMBER							
Pa	RT 2: PROPRIETOR	DETAILS						
PROPRIETOR/COMPANY NAME						ABN / ACN N	UMBER	
Dir	ECTOR NAME/S							
REG	GISTERED COMPANY AD	DDRESS						
RES	SIDENTIAL ADDRESS							
						S BELOW MUST BE SUPPLIED		
						EQUIRED TO PROVIDE A CUI	RRENT EMAIL	
AUL	DRESS. IF AN EMAIL ADDF	RESS IS NOT SUPPLIED,	A PKULES	SING SEKVICE FEE IVIAT	' BE APPLIED.			
RESIDENTIAL TELEPHONE NUMBER				MOBILE TELEPHONE	Number			
Ем	AIL ADDRESS							
Cor	NTACT PERSON (IF DIFF	ERENT FROM ABOVE)	Position				
DAT	TE ON WHICH CHANGES	WILL TAKE EFFECT/	DATE OF C	OMMENCEMENT OF E	BUSINESS (W	HICHEVER IS APPLICABLE)		
PLE	ASE INDICATE FOR WH	ICH PURPOSE YOU AI	RE SUBMI	TTING THIS FORM BY	TICKING ON	IE OF THE BOXES BELOW		
	New Premises		CHANGE	OF PROPRIETOR		CHANGE OF TRADING NA	AME	
	CEASED TO EXIST		CEASED	EASED TO TRADE		OTHER		
IF Y	OU TICKED 'OTHER' PL	EASE PROVIDE DETAI	LS IN THE	BOX BELOW				

PLEASE INDICATE THE FURTHER INFORMATI					TICKIN	G THE	APPLIC	ABLE BOX/ES AND INCLUDE		
☐ BEAUTY SALON			SWIMMING AND	O/OR SPA POOL				HAIRDRESSER		
☐ SKIN PENETRATI	ON*		COOLING TOWE	R/WARM WATER SY	YSTEM					
*PROCEDURES ARE DEF NOTE: A SERVICE FEE AN PLAN AND CAN BE VIEWE	PPLIES TO INSPECTIONS	OF RE	GULATED PREMISES.	•		IEWED /	ANNUALL	Y UNDER COUNCIL'S MANAGEMENT		
Number of Cooling	3 TOWER/WARM V	VATER	UNITS	TYPE OF SKIN PEN	IETRATI	ON PR	OCEDU	re/s		
TYPE & NUMBER OF	SWIMMING POOL/S	SPA								
PART 3: DEVELO	PMENT CONSE	NT								
IF DEVELOPMENT COR								EASE CONTACT THE DEVELOPMENT CONSENT.		
HAS DEVELOPMENT OF COMPANY OF COM	ONSENT BEEN GRAI	NTED	FOR THE ABOVE US	SE?	YES		No			
HAS A CONSTRUCTION	N CERTIFICATE (CC)	BEEN	ISSUED FOR THE F	PREMISES FIT-OUT?	YES		No			
PART 4: PRIVAC	y & Personal	Info	RMATION PRO	TECTION NOTICE	E					
PURPOSE OF COLLECTION: INTENDED RECIPIENTS: SUPPLY:	THE INTENDED RECIPIENT OF THE INFORMATION IS CITY OF PARRAMATTA COUNCIL. WHILE THE SUPPLY OF THIS INFORMATION IS COMPULSORY, THE PERSONAL INFORMATION YOU PROVIDE WILL ENABLE COUNCIL TO MEET ITS STATUTORY									
Access/Correction: Storage:	REQUIREMENTS. THE PERSONAL INFORMATION CAN BE ACCESSED BY YOU AND MAY ALSO BE AVAILABLE TO THIRD PARTIES IN ACCORDANCE WITH CITY OF PARRAMATTA'S ACCESS TO INFORMATION POLICY AND PRIVACY MANAGEMENT PLAN. YOUR PERSONAL INFORMATION MAY BE DISCLOSED TO THIRD PARTIES FOR THE PURPOSE OF COMPLYING WITH THE APPLICABLE LEGISLATION. YOU MAY MAKE AN APPLICATION FOR ACCESS OR AMENDMENT TO PERSONAL INFORMATION HELD BY COUNCIL. COUNCIL WILL CONSIDER ANY SUCH APPLICATION IN ACCORDANCE WITH THE PRIVACY AND PERSONAL INFORMATION PROTECTION ACT 1998. COUNCIL IS THE AGENCY THAT HOLDS THE PERSONAL INFORMATION. COUNCIL MAY BE CONTACTED ON 9806 5050 OR AT 126 CHURCH STREET,									
	PARRAMATTA NSW 2150.									
PART 5: LODGEN										
EMAIL: MAIL: In person:	TAIL: CITY OF PARRAMATTA, PO BOX 32, PARRAMATTA NSW 2150									
FOR FURTHER INFORM	MATION REGARDING	YOUI	R APPLICATION PLE		' TELEPI	HONE (on 02 9	9806 5050 or visit our		
PART 6: APPLICA										
I DECLARE THAT TO T	HE BEST OF MY KNO	WLED	GE, THE INFORMA	TION PROVIDED IN T	HIS API	PLICAT	ION IS A	CCURATE AND CORRECT.		
PROPRIETOR NAME		Pro	OPRIETOR SIGNATI	JRE	DATE			1		
OFFICE USE ONLY NEW ACTIVITY FILE NUMBER	☐ EXISTING	G PREN	MISES, PREVIOUS REC	GISTRATION	☐ \ Date		PREMIS	SES REPORT ATTACHED?		
1	1				1					