

Application to transfer Registration of a Health Premises

Public Health & Wellbeing Act 2008 (Vic)



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Council offices: 25 Ferres Boulevard, South Morang

- Please use this form to apply to the City of Whittlesea Council to transfer registration of a health premises.
- Where tick boxes () appear please tick where applicable.

Office use only:	Issued:	Rec'd:	EHO:	Fee:	Auth ref:
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Premises details

Current trading name

Street address

Suburb & postcode

Current Proprietor details (seller)

Title

First name

Surname

Legal entity name - a trust or trustee is not a legal entity for this application and therefore cannot be used

ABN

ACN

Residential address

Suburb & postcode

Postal address

Suburb & postcode

Contact numbers

Business:

Mobile:

Email

Activities to be carried out

- | | |
|--|--|
| <input type="checkbox"/> Make up only | <input type="checkbox"/> Foot spa treatment* |
| <input type="checkbox"/> Manicures, pedicures, nail treatments | <input type="checkbox"/> Hair removal by electrolysis or wax* |
| <input type="checkbox"/> Facial or body skincare treatments* | <input type="checkbox"/> Tattooing* (inc. permanent and semi-permanent) |
| <input type="checkbox"/> Colonic irrigation* | <input type="checkbox"/> Ear, body piercing or other skin penetration procedures |
| <input type="checkbox"/> Other (please specify) | |

* Premises with higher risk activities must be renewed annually under the Public Health & Wellbeing Act 2008(Vic)

Proposed Proprietor details (buyer)

Title

First name

Surname

Legal entity name - a trust or trustee is not a legal entity for this application and therefore cannot be used

ABN

ACN

Residential address

Suburb & postcode

Postal address

Suburb & postcode

Contact numbers

Business:

Mobile:

Email

Main contact for the business (if not the new proprietor)

Title

First name

Surname

Residential address

Suburb & postcode

Contact numbers

Business:

Mobile:

Email

Proposed proprietor declaration

By ticking this box, I understand that:

The information provided in this application is true and complete to the best of my knowledge. This application is a legal document and penalties exist for provide false or misleading Information.

Selling proprietor/s signature

If the business is owned by a sole trader or a partnership, the proprietor/s must sign and print names
If the business is owned by a company or association, an authorised signatory may sign on behalf of that body

Signature of selling proprietor 1

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Signature of selling proprietor 2

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Company signatory

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Buying proprietor/s signature

If the new proprietor is a sole trader or a partnership, the proprietor/s must sign and print names
If the new proprietor is a company or association, an authorised signatory may sign on behalf of that body

Signature of new proprietor 1

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Signature of new proprietor 2

Date

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Company signatory

D	D	M	M	Y	Y
---	---	---	---	---	---

Print name

Please note:

Transfer is not official until Council has approved the application and issued a transfer certificate

Fees

Please contact Council's Health Services for the registration fee for your business or refer to <http://www.whittlesea.vic.gov.au>

An invoice will be issued to the applicant of this form.

Please note: This application will not be processed until payment has been received.



Free Telephone Interpreter Service

العربية	9679 9871	Italiano	9679 9874	ਪੰਜਾਬੀ	9679 9879	Tiếng Việt	9679 9878
Ελληνικά	9679 9873	Македонски	9679 9875	தமிழ்	9679 9879	Other	9679 9879
हिंदी	9679 9879	简体中文	9679 9857	Türkçe	9679 9877		

Privacy Statement

Council is collecting the information on this form for the purpose of administration and enforcement of the Public Health and Wellbeing Act 2008 (Vic). The information will be used solely by Council for the primary purpose or directly related purposes. As required under the Public Health and Wellbeing Act 2008 (Vic), this information will be kept in a register (computerised database). In accordance with the Public Health and Wellbeing Act 2008 (Vic) a copy of this information must be made available free of charge to any person who requests it. You may access this information by contacting Health Services on 9217 2277.