

Application for Transfer of Registration of Prescribed Accommodation

Public Health and Wellbeing Act 2008



This application has a fee of \$127.50 (less than 25 rooms) or \$194.00 (25 rooms or more)

There are some hard words in this form. The hard words are in [blue](#). You can read what they mean on page 2.

Current [Proprietor](#)

| | | | | | | | |
|---------------------|--|-------|----------|---------|--|--|--|
| Name/s: | | | | | | | |
| Postal address: | | | | | | | |
| | | | Postcode | | | | |
| Phone number: Home: | | Work: | | Mobile: | | | |
| Email address: | | | | Fax: | | | |

New [Proprietor](#)

| | | | | | | | |
|---------------------|--|-------|----------|---------|--|--|--|
| Name/s: | | | | | | | |
| Postal address: | | | | | | | |
| | | | Postcode | | | | |
| Phone number: Home: | | Work: | | Mobile: | | | |
| Email address: | | | | Fax: | | | |

Business Details

| | | | | | | | |
|---|--|--|----------|--|--|--|--|
| Trading name: | | | | | | | |
| Address: | | | | | | | |
| | | | Postcode | | | | |
| Australian Business Number (ABN): | | | | | | | |
| Type of Prescribed accommodation: _____ | | | | | | | |
| _____ | | | | | | | |
| _____ | | | | | | | |
| Number of bedrooms available for occupiers on payment of consideration: | | | | | | | |

Privacy Statement

The East Gippsland Shire Council asks for details about you to collect rates, approve permits and licences, and run a range of community services. The information you give to us on this form is used only for the reasons set out in the form and is not given to anybody else. Sometimes we may supply details about you to someone else, but only if we are allowed by law, or to protect someone or property.

When information is given out, Council will always try to make sure your privacy is protected in line with the *Privacy and Data Protection Act 2014*. You may ask for more information about Council's Privacy Policy by contacting our Information Privacy Officer on 03 5153 9500 or e-mail feedback@egipps.vic.gov.au

JUL 2025

Application for Transfer of Registration of Prescribed Accommodation

Public Health and Wellbeing Act 2008



| |
|---|
| I/we, _____ the proprietor/s of this prescribed accommodation hereby apply under the <i>Public Health and Wellbeing Act 2008</i> to transfer the registration to _____ |
|---|

| | |
|--|----------------------|
| Current proprietor/s signature: | |
| Name/s: _____ | Date: ____/____/____ |

| | |
|------------------------------------|----------------------|
| New proprietor/s signature: | |
| Name/s: _____ | Date: ____/____/____ |

| |
|--|
| Hard Words: Prescribed: Set by rule or order Occupier: A person or company residing in or using a property as its owner or tenant Proprietor: The owner or owners of a business, or a holder of property. |
|--|

Contact Council



03 5153 9500



feedback@egipps.vic.gov.au



eastgippsland.vic.gov.au



PO Box 1618, Bairnsdale 3875

Customer Service Centres:

- **Bairnsdale:** 273 Main Street
- **Lakes Entrance:** 18 Mechanics Street
- **Mallacoota:** 70 Maurice Avenue
- **Omeo:** 179 Day Avenue
- **Orbost:** 1 Ruskin Street
- **Paynesville:** 55 Esplanade

Privacy Statement

The East Gippsland Shire Council asks for details about you to collect rates, approve permits and licences, and run a range of community services. The information you give to us on this form is used only for the reasons set out in the form and is not given to anybody else. Sometimes we may supply details about you to someone else, but only if we are allowed by law, or to protect someone or property.

When information is given out, Council will always try to make sure your privacy is protected in line with the *Privacy and Data Protection Act 2014*. You may ask for more information about Council's Privacy Policy by contacting our Information Privacy Officer on 03 5153 9500 or e-mail feedback@egipps.vic.gov.au

JUL 2025