

Application for Transfer of Registration of a Health Premises

Public Health and Wellbeing Act 2008



This application has a fee of \$141.50

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

Trading name:							
Business address:							
			Postcode				
Postal address:							
			Postcode				
Australian Business Number (ABN):							
Phone number: Work:		Mobile:					
Email address:				Fax:			

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

Application for Transfer of Registration of a Health Premises

Public Health and Wellbeing Act 2008



Description of the use of premises: _____

I/We, _____
the **proprietors** of this health premises, hereby apply to transfer the registration for the year ending 31 December 20____ to, _____
under the requirements of the *Public Health and Wellbeing Act 2008*.

Current **proprietors** signature:
Name/s: _____ Date: ____ / ____ / ____

New **proprietors** signature:
Name/s: _____ Date: ____ / ____ / ____

Hard Words
Proprietor: The owner of a business, or a holder of property.
Requirements: A thing that is needed or wanted.

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

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