

APPLICATION TO REGISTER

Made under Section 68 of the *Local Government Act 1993*

Tick appropriate box

- Food Premises
- Hairdresser/Beautician Premises
- Skin Penetration Premises
- Boarding House/Premises for Shared Accommodation

1 Property Details

No	Street	Suburb
<input type="text"/>	<input type="text"/>	<input type="text"/>

2 Applicant name, address and contact details

Title: Mr Mrs Miss Ms Dr Other _____

Full family name (no initials) or Company name

ABN No

Full first names (no initials) (or ACN)

Postal address

Phone (business)

Mobile

Facsimile

Contact person

Email address

3 Proprietor's Details

This section must be completed if the applicant is not the proprietor.

Proprietor's name (please print)

Address

Telephone

Signature

Email

4 Particulars of premises

Business Trade Name

Address

Total number of employees (where applicable)

Number of full time employees

Number of part time employees

Number of casual employees

Number of lodgers (applicable to boarding houses only)

5 Public Information

In accordance with the *Government Information (Public Access) Regulation 2009*, information supplied in this application is considered to be open access information and is available for inspection by members of the public.

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Privacy Statement: Personal details requested on this form is supplied to Strathfield Council on a voluntary basis but if you cannot provide the information requested, Council may not be able to process your application. Personal details requested on this form will be used to process your application. Information provided by you may be accessed by the members of the public. Council is to be regarded as the agency that holds the information. You may make application for access or amendment to information held by Council.

6 Land Owner approval

Being the owner of the land to which this application relates, I hereby give consent to the making of the application and authorise and consent to entry of the application site by Council officers for the purpose of processing this application.

Full name (please print – must be legible)

Owners signature

Date

7 Applicants Signature

All information supplied on this application is true and correct.

Applicant's signature

Date