

Section 1 Proposal

<input type="checkbox"/> Renewal <input type="checkbox"/> Change of Details <input type="checkbox"/> New – <i>if new premises, provide DA number, where applicable</i>			
Business Description (<i>eg Bakery, Takeaway, Fruit Shop, Tattooist, Beauty Therapy</i>)			
Licence/Registration Type	<input type="checkbox"/> Food Business	<input type="checkbox"/> Skin Penetration	
	<input type="checkbox"/> Hair Salon – Mobile Business? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Shared Accommodation – <i>How many boarders?</i> <input type="checkbox"/>	
	<input type="checkbox"/> Public Swimming Pool/s – Number of Pools? <input type="checkbox"/>	<input type="checkbox"/> Mortuary	
	<input type="checkbox"/> Cooling Tower – Type: <input type="checkbox"/> Water Cooling <input type="checkbox"/> Warm Water		
	<input type="checkbox"/> Other - <i>Please specify</i>		

Section 2 Licensee Details

Company Name			
Trading Name			
Business Name			
Charitable or non-profit organisation	<input type="checkbox"/> Yes <input type="checkbox"/> No	If 'Yes', Registered Charitable No	
ABN No			
Name	Surname		Mr / Mrs / Other
	Given		Middle
Postal Address	Number and Street		
	PO Box / DX / Other		
	Suburb / Town		State Postcode
Contact Details	Phone		Mobile
	Fax		Email
Signature	Date		/ /

Section 3 Site Details

Lot Description – <i>(Attach extra sheet if insufficient space)</i>	Lot/Unit	Sec	DP/SP
	Number and Street		
Address	Suburb/Town		

Section 4 Owner Consent

Consent – <i>(All owners must give their consent. Companies must attach a letter containing the signatures of at least one Director)</i>	I / We of as owner(s) of the property subject of this application, give consent to the application and grant Council the power to carry out inspections in relation to this application. <div style="text-align: right;">Date / /</div>
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Section 5 Emergency Contact Details

Company Name			
Name	Surname	Mr / Mrs / Other	
	Given	Middle	
Postal Address	Number and Street		
	PO Box / DX / Other		
	Suburb / Town	State	Postcode
Contact Details	Phone	Mobile	
	Fax	Email	

Section 6 System Details – Cooling Tower Only

Identification of Cooling Tower	Model
	Serial Number
	Including this Cooling Tower, how many Cooling Towers are there on this site in total?

Section 7 Contractor

Company Name			
Name	Surname	Mr / Mrs / Other	
	Given	Middle	
Postal Address	Number and Street		
	PO Box / DX / Other		
	Suburb / Town	State	Postcode
Contact Details	Phone	Mobile	
	Fax	Email	

Section 8 Location of Tower

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Privacy Notification (*Privacy and Personal Information Protection Act 1998* – Section 10)

The personal information that Council is collecting from you on this application form is personal information for the purposes of the Privacy and Personal Information Protection Act 1998 ('the Act'). The intended recipients of the personal information are officers within the Council and any person wishing to inspect the file in which the Application will be filed. The supply of the information by you is not voluntary and if you cannot provide or do not wish to provide the information sought, the Council will be unable to process your application. Council is collecting this personal information from you in order to comply with the requirements of the legislation under which the Application is made. You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such application in accordance with the Act. Council is to be regarded as the agency that holds the information. Enquiries concerning this matter can be addressed to Council on telephone 4227 7111.