

LICENSED PREMISES REGISTRATION FORM 2017-2018

Licensed Premises include: food premises (fixed and mobile) health and beauty premises (health and beauty salons, tattooists, hairdressers and barbers), cooling towers, warm water systems and public swimming pools.

Please submit form to Armidale Regional Council for processing and ensure ALL sections of the form are complete.

1. License Number (ie FOOD/1, HDB/1, POOL/1, COOL/1, VAN/1) or NEW

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2. Applicant Details

| | | |
|--|--|--|
| Surname | Given Name(s) | |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | |
| Name of Business | ABN | |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | |
| Postal Address | | |
| <input style="width: 95%;" type="text"/> | | |
| Town | State | Postcode |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> |
| Email Address | | |
| <input style="width: 95%;" type="text"/> | | |
| After Hours Telephone | Work Telephone | Mobile |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> |

3. Property Details

| | | |
|--|--|--|
| Street Address | | |
| <input style="width: 95%;" type="text"/> | | |
| Town | State | Postcode |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> |

4. Australian Health Practitioner Regulation Agency Details (if applicable)

| | | |
|--|---|--|
| Surname of Health Practitioner | Given Name(s) of Health Practitioner | |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | |
| Registration Number: | | |
| <input style="width: 95%;" type="text"/> | | |

Privacy and Personal Information Protection Notice:
Purpose for collection: For formal applications under the *Government Information (Public Access) Regulation 2009* and to maintain Council records for licensed premises.
Intended Recipients: Council staff and public access under Schedule 1 of the *Government Information (Public Access) Regulation 2009*.
Supply: a formal access application is voluntary; however a completed application is required for delivery and management of GIPA applications.
Storage: Council's adopted records management system and archives.
General information about GIPA Act is available by calling the Office of the Information Commissioner on free call 1800 463 626 or at its website: www.oic.nsw.gov.au

5. Declaration and Signature

I declare that the information I have provided is true and correct.

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| Name | Signature | Date |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> |
| Council use: Received by | Signature | Date |
| <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> | <input style="width: 95%;" type="text"/> |