



Hairdressing Premises

Application for Registration of Premises / Change of Occupancy Noted

HEALTH (REGISTRATION OF PREMISES) REGULATIONS 1966

Details of Applicant

Applicant's Full Name/Company Name:

(Note - Where applicant is a company then documented evidence of company is required)

Postal Address for service of documents:

Daytime Contact Telephone Number:

Full Name of Daytime Contact Person:

Details of Premises

Address of Premises:

Trading as:

Type of Premises - Please tick:

- Commercial, Home Occupation, Barber

Other :

Change of Ownership Details

Date that the change of ownership occurs/has occurred:

Attached, please find fees payable totalling: \$

- \$40.00 (GST inclusive) - Change of Owner
\$275.00 (GST inclusive) - New Premises (includes 1st inspection fee)
\$175.00 (GST inclusive) - Annual registration fee

Applicant's Signature:

Date:

OFFICE USE ONLY
Licence Number -
Entered
Approved
ICC Ref No. LC
Receipt No
Fee Received