



Sale Yards

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:.....

Change of Ownership Details

Date that the change of ownership occurs/has occurred.....

Attached, please find fees payable totalling: \$ _____

- Fees \$40.00 (GST inclusive) - Change of Owner
- \$275.00 (GST inclusive) - New Premises (includes 1st inspection fee)
- \$185.00 (GST inclusive) – Annual registration fee

Applicants Signature:

Date:

OFFICE USE ONLY	
Licence Number -	ICC Ref No. LC
Entered <input type="checkbox"/>	Receipt No.....
Approved <input type="checkbox"/>	Fee Received