

## Application to transfer an accommodation business

Please use this form to notify Council of your intent to transfer the registration of an accommodation business. Under the Public Health and Wellbeing Act 2008, businesses accommodating 6 or more persons must register with local Council.

Owner	Title		
	Name (s)		
	Surname		
Postal address			
	Town	Postcode	
Email			
Telephone	Phone	Mobile	
the primary cor	tact the business owner	☐ No (Please complete below	w)
\!			
rimary Co	ntact (if different from at	oove)	
	Title	oove)	
		oove)	
Owner	Title	oove)	
Owner	Title Name (s)	oove)	
Owner	Title Name (s)	Postcode	
Owner Postal address	Title Name (s) Surname		
Owner  Postal address  Email  Telephone	Title Name (s) Surname		
Owner  Postal address  Email  Telephone	Title Name (s) Surname Town	Postcode  Mobile	□ No
Owner  Postal address  Email  Telephone  re you completing	Title Name (s) Surname  Town  Phone	Postcode  Mobile	□ No
Owner  Postal address  Email  Telephone  re you completing usiness type (ple	Title Name (s) Surname  Town  Phone  g this form on behalf of the businessease tick appropriate box):	Postcode  Mobile	□ No
Owner  Postal address  Email  Telephone  re you completing usiness type (ple	Title Name (s) Surname  Town  Phone  g this form on behalf of the busines	Postcode  Mobile	□ No

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Business de	etalis —				
Business					
trading name					
Company name					
(if different to					
trading name)					
Business					
Trading address					
(if different from					
owner's postal					
address)	Town Postcode				
Australian					
Business					
Number (ABN)					
<ul><li>if available</li></ul>					
Australian					
Company					
Number (ACN)					
<ul><li>if available</li></ul>					
Diagon notes truct f	funda ara nat aggentable ag company or proprietor name				
Please note. trust i	funds are not acceptable as company or proprietor name.				
Type of bus	iness				
	_				
Motel / hotel	Residential accommodation Holiday camp				
_					
☐ Bed and Bre	akfast Rooming house				
Rooming house operator's licence number (for rooming houses only)					
Number of rooms	available Maximum number of guests				
	u are planning to serve food in your accommodation business you may also				
-	siness Registration. Depending on the type of food provided, additional registration				
fees may apply.					
Please visit the <a href="https://www.wangaratta.vic.gov.au">www.wangaratta.vic.gov.au</a> for more information about food registration, or call 03 5722					
0888 to speak with an Environmental Health Officer.					

Wangaratta Government Centre

Supporting documents						
0 0	cached plans of the layout include: Size of all rooms Proposed occupancy limits of each roon Location and number of facilities Floor areas (in m²)	n				
Signatur	es					
New proprieto	or name:					
Signature:		Date:				
Existing/prev	ious proprietor name:					
Signature:		Date:				

## Registration and renewal fees

Once your application has been received, we will contact you with an invoice and payment options for your registration fee and premises assessment fee.

You are required to renew your registration annually.