

NEW PREMISES REGISTRATION / CHANGE OF DETAILS FORM

New Application ☐

Change of Details ☐

FEES AND CHARGES

Assessment

Lodgement Fee

Job No. 1205-1170

Receipt No.

Date

Would you like a copy of the receipt?

☐ Yes

☐ No

PART A – BUSINESS DETAILS

Business/Trading Name:

ABN/ACN:

Person/Company Name:

Director Name/s:

Business Postal Address:

Proprietor/Director Residential Address:

Business Phone No:

Home Phone No:

Mobile No:

Alternate Phone No:

Email:

Business Trading Hours:

☐ Day-time

☐ Day and night-time

☐ Night-time only

Is the business a home business?

☐ Yes

☐ No

Type of Business (tick the most relevant business type):

☐ Hairdresser

☐ Beauty Salon

☐ Skin Penetration

☐ Place of Shared Accommodation

☐ Swimming Pool and/or Spa Pool

☐ Other:

PART B – PROPERTY DETAILS

Lot / Section / DP Numbers can be found on the Rates Notice or Certificate of Title for the land.

Street No:

Street Name:

Shop No:

Shopping Centre/Building Name:

Town/Locality:

Postcode:

Lot No/s:

Section:

DP No/s:

What type of water supply does the property have:

- ☐ Reticulated ☐ Water from a water carter
☐ Rain Water Tanks ☐ Other:

Is the property connected to sewer? ☐ Yes ☐ No

PART C – DEVELOPMENT CONSENT

Has development consent been granted for the above use? ☐ Yes ☐ No

DA/CDC No:

Has a Construction Certificate (CC) been issued for the premises fit-out? ☐ Yes ☐ No

CC No:

PART D – APPLICANT DECLARATION

Do you agree to receive all correspondence via email? ☐ Yes ☐ No

I declare that to the best of my knowledge, the information provided in this application is accurate and correct. I/we also authorise Council representatives to enter the property for the purpose of site inspections.

Name: Signature: Date:

PART E – LODGEMENT DETAILS

Please send your completed registration form to Wentworth Shire Council:

By Mail: PO Box 81
WENTWORTH NSW 2648

In Person: 26-28 Adelaide
WENTWORTH NSW 2648

Email: council@wentworth.nsw.gov.au

OFFICE USE ONLY

FS No: Assessment No: DA No: CC No:

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