

**Regulated Business Form –**

For use when applying to operate a Food, Accommodation or Personal Appearance Business

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| **IMPORTANT** | The submission of this application does not allow you to commence trading. This application form is the start of the application process. You will be contacted within 5 working days of receipt of this form for further information about your application. An inspection will be carried out of the premises and an invoice will be issued for payment prior to completing the registration process. |

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| **Applicant Details** | | |
| Business Structure |  **Sole trader**  **Partnership**  **Company**   **Association**  **Other – Give details ..……………..……………………..** | |
| **Full name(s) of all applicant(s)**   Sole trader   Partners   **If a company, please provide name(s) of all director(s)**   **If an association, please provide copy of Certificate of Incorporation** | **Family name (Mr Mrs Miss Ms)** | **Given name(s)** |
| **Name of registered incorporated entity (company, trust, association etc)**  **(if applicable)**  If a company, please provide a copy of full ASIC Company Statement (showing names of public officers/ directors) and ABN Certificate  If a trust, please provide a copy of full ASIC Company Registration Certificate (showing names of public officers/directors) and ABN Certificate |  | |
| ACN |  | |
| ABN |  | |
| **Consent to conduct company search on behalf of applicant/s**  If it is not possible for supporting documents to be provided during the application process, an applicant may give consent to the Colac-Otway Shire Council, to conduct a company search on their behalf.  Failure to supply supporting documents may result in delays in processing applications and issuing of the licence.  **** I/We, the applicant/s conducting the business for which this form is being submitted, give consent for a Colac-Otway Shire representative to conduct a company search on our behalf.  **** I/We, agree to pay the administration fee of $46.50 will be incurred for this service.  **If giving consent to conduct company search, please tick the boxes above and sign below with name clearly printed underneath**   **I/We hereby certify that all information provided on this form is true and correct.**   All applicants must sign individually   If a company, show capacity of person signing  **SIGNATURE(S) OF ALL APPLICANT(S) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Print name/s clearly here \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Date of application: \_\_\_\_/\_\_\_\_/\_\_\_\_** | | |
| **Contact Details** | | |
| **Postal address of applicant(s) for service of notices and other official documents:** |  | **Business contact details:**  Phone:  Fax:  Mobile: |
| **Email address:** |  | |
| **Do you want to receive the Colac-Otway Shire Health Protection Unit Newsletter and other information relevant to your business?** | |  | | --- | |  YES – Please send to the above email address.   YES – Please send to the postal address indicated above.   NO – I do not wish to receive the newsletter or other relevant information | | |
| **Do you want to receive electronic Alerts from Council? Food Recalls, Reminders for registration and renewals** |  YES – Please send to the nominated communications   NO – I do not wish to receive electronic alerts |  EMAIL Send to the above email address   SMS send to the above mobile |
| **Authorised contact name:** | **Position:** | **Authorised contact phone** numbers:  Phone:  Fax:  Mobile: |

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| **Business Details** | | |
| Intended commencement of trade |  | |
| Location of business if other than postal address |  | |
| **Trading name (if applicable):**  If operating under a trading name, please provide copy of Business Name Certificate issued either by Fair Trading NSW (if before 28/5/2012) or ASIC (if registered after 28/5/2012) |  | |
| Do you have an existing Registration with Colac-Otway Shire? | Registration number |  |

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| **Business Activity** | |
| Registrable Business | Details/Description |
| Food Business:   Manufacturing/catering   Café/Restaurant   Temporary/Festival   Mobile Food   Other (specify) |  |
| Accommodation Business:   Caravan Park   Bed and Breakfast   Other (specify) |  |
| Personal Appearance Service:   Hairdresser (hair cutting only)   Beauty parlour   Tattooing/piercing   Acupuncture/dry needling   Other (specify) |  |