



MANSFIELD SHIRE

# Application for Registration of a Personal Care/Body Art Premises

Public Health and Wellbeing Act 2008

33 Hihett Street, Mansfield  
Private Bag 1000  
Mansfield Vic 3724

Phone: (03) 5775 8555  
E: [council@mansfield.vic.gov.au](mailto:council@mansfield.vic.gov.au)  
Office Hours: 8:15am to 5:00pm  
Monday to Friday

## Proprietor (applicant) details

Type of proprietor: Company  Person  Partnership

Name of company:  ACN/ABN

If proprietor is a company, provide the name and position of authority of the person signing this document

Name:  Authority e.g. Director

Name of person (if not a company)

Family Name

Given names

Proprietor postal address:

(includes company address if applicant is a company)

Contact numbers (ensure that at least one contact phone number is provided and include the area code):

Bus  A/H  Mob

E-mail

If proprietor is a partnership the above detail needs to be provided for each partner.

## Premises details

Premises street address and suburb:

Trading name of premises:

Type of personal care/body art procedures to be carried out by business (select all that apply):

### (Low risk activities/services)

Hairdressing  Application of cosmetics that does not involve skin penetration or tattooing

### (Higher risk activities/services)

Manicures, pedicures, other nail treatments  Facial or body treatments  
 Colonic irrigation  Body piercing or other skin penetration procedures  
 Hair removal by electrolysis or wax.  Ear piercing

Tattooing (includes permanent and semi-permanent make up or cosmetic tattooing)

Other (specify):

Manager/Contact person at premises (if not the proprietor):  As detailed above in 'Proprietor details'

Family Name

Given names

Contact numbers at premises (ensure that at least one contact phone number is provided and include the area code):

Bus  Mob

E-mail

## Submission of application and registration fees

### FEE

Ongoing PH&W Act Registration	<b>\$160 (applicable businesses only)</b>
2018 PH&W Act Registration (no skin penetration)	<b>\$160</b>
2018 PH&W Act Registration (with skin penetration)	<b>\$185</b>

### MAIL

Mail with payment to:

**Mansfield Shire Council**  
**Private Bag 1000**  
**MANSFIELD VIC 3724**

Cheques should be made payable to 'Mansfield Shire Council'. Receipts will be issued for mailed payments

### IN PERSON

Present form intact at Council office:

33 Highett Street  
 Mansfield Vic 3722

**Cash, Cheque, Credit and Eftpos Available**

## Privacy statement

Mansfield Shire Council is collecting the information on this form for the purpose of administration and enforcement of the *Public Health and Wellbeing Act 2008*. The information will be used solely by Council for the primary purpose or directly related purposes. As required under the *Public Health and Wellbeing Act 2008* this information will be kept in a database. You may access this information by contacting Mansfield Shire Council on (03) 5775 8555.

## Declaration

I understand and acknowledge that the information provided in this application is true and complete to the best of my knowledge and that this application forms a legal document and penalties exist for providing false or misleading information.

Authorised person (on behalf of company)/  
 Proprietor (primary contact) signature

Date

### OFFICE USE ONLY:

<b>LC REF:</b>	<b>RECEIPT No:</b>	<b>DATE:</b>
<b>FILE No:</b>	<b>FEE PAID:</b>	<b>RECEIPT TO: 400301.75</b>

## CREDIT CARD PAYMENT

Amount \$ \_\_\_\_\_ by Visa  MasterCard

Credit Card Number: \_\_\_\_\_

Expiry Date: \_\_/\_\_/\_\_ CSV: \_\_\_ (on reverse of card)

Cardholder Name: \_\_\_\_\_ Signature: \_\_\_\_\_

