



Mansfield Shire

Registration - Prescribed Accommodation Public Health & Wellbeing Act 2008

I/We the undersigned, hereby apply to **Transfer Registration** for the year ending **31 December 2022** under the provisions of the Public Health & Wellbeing Act 2008 the Premises hereunder described and depicted in the plan lodged with Council.

Please complete and ensure this form is signed

Trading Name:

Business Description:

Premises Address:

New Proprietor(s) Name:
(Person(s) or Company only)

Postal Address:

Telephone:

B.H:

Mobile:

Email Address:

Business ABN Number:

**Max No. of Persons
Accommodated (incl. staff):**

No. of Accommodation Rooms:

New Proprietor(s) Signature(s)

All forms must be completed & signed

Date: / /

**Application Endorsement by Current Proprietor(s)
Signature(s)**

All forms must be completed & signed

Date: / /

Accommodation classes include Residential Accommodation, Hotels & Motels, Hostels, Student Dormitories, Holiday Camps & Rooming Houses.

OFFICE USE ONLY: File No.

Debtor No.

Fee Paid