

Council Use Only	
Receipt Number	<input type="text"/>
Date Paid	<input type="text"/>
Amount	<input type="text"/>

Benalla Rural City Council
 Phone: 03 5062600
benalla.vic.gov.au

Fields marked with an asterisk (*) are mandatory and must be completed.

Council Specific Information

Please use this form to notify Benalla Rural City Council of your intent to register a prescribed accommodation related business under the Public Health and Wellbeing Act 2008.

Please note the registration is not official until Council has approved the application and issued a Certificate of Registration.

Applicant Details

Proprietor

Title*	Surname*	Given Name 1*	Given Name 2
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ABN

ACN

Business Name

Company Name

Address

PO Box
 GPO Box
 Private Bag
 Locked Bag
 RMB
 RSD

Street Address/ Postal Address*

Suburb / Town*	State *	Postcode *
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please provide at least one phone number and include the area code *

Business Phone	After hours phone	Business Fax	Mobile
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Email

Proprietor 2 (if applicable)

Title	Surname	Given Name 1	Given Name 2
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ABN	ACN
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Business Name	Company Name
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Address

PO Box GPO Box Private Bag Locked Bag RMB RSD

Street Address/ Postal Address

Suburb / Town	State	Postcode
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Please provide at least one phone number and include the area code

Business Phone ()	After hours phone ()	Business Fax ()	Mobile ()
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Email

Proprietor 3 (if applicable)

Title	Surname	Given Name 1	Given Name 2
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ABN	ACN
-----	-----

Business Name	Company Name
---------------	--------------

Address

PO Box GPO Box Private Bag Locked Bag RMB RSD

Street Address/ Postal Address

Suburb / Town	State	Postcode
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Please provide at least one phone number and include the area code

Business Phone ()	After hours phone ()	Business Fax ()	Mobile ()
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Email

Contact Details (if different from above)

Title Surname Given Name 1* Given Name 2

Address
 PO Box GPO Box Private Bag Locked Bag RMB RSD
 Street Address/ Postal Address

Suburb / Town State Postcode

Business Phone After hours phone Business Fax Mobile

Email

Premises Details

Address

Street address / Postal address *

Suburb / Town * State * Postcode *

Primary Language Spoken at Premises * *(to assist with communication in the future)*

Will the premises provide food to guests and/or the public? *
 (e.g. bed and breakfast)

Yes No

If yes, please complete an Application to Register a Food Related Premises

Please specify the type of accommodation *

- Residential Accommodation Hotel/Motel Hostel
- Student Dormitory Holiday Camps Rooming House
- B&B > 5 Beds (Unsewered with a private water supply)
 B&B > 5 Beds (In Town)
 B&B < 6 Beds (Unsewered with a private water supply)
 B&B < 6 Beds (In Town)
- Other (please specify)

Maximum number of guests accommodated		Number of rooms	
NOTE: All applicants must consult with Councils Town Planning and Building departments with respect to the establishment of your new business. If you provide accommodation for five or less people and will not be serving food to guests and/or public, registration with us is optional.			

Supporting Documents

Please provide a plan of the premises drawn to a scale of not less than 1:100 and showing the proposed use of each room.

Payment Details	
Fees & Charges - 2017/2018	
New Premises First Year Registration Fee - Motels, Hotels, School Camps	\$250.50
Annual Registration Fee - Motels, Hotels, School Camps	\$167.00
New Premises First Year Registration Fee - B&B > 5 Beds (Unsewered with a private water supply)	\$157.50
Annual Registration Fee - B&B > 5 Beds (Unsewered with a private water supply)	\$105.00
New Premises First Year Registration Fee - B&B > 5 Beds (In Town)	\$126.00
Annual Registration Fee B&B > 5 Beds (In Town)	\$84.00
OPTIONAL New Premises First Year Registration Fee - B&B < 6 Beds (Unsewered with a private water supply)	\$94.50
OPTIONAL Annual Registration Fee - B&B < 6 Beds (Unsewered with a private water supply)	\$63.00
OPTIONAL New Premises First Year Registration Fee - B&B < 6 Beds (In Town)	\$79.50
OPTIONAL Annual Registration Fee - B&B < 6 Beds (In Town)	\$53.00

Declaration

I understand and acknowledge that:

- The information provided in this application is true and complete to the best of my knowledge
- This application forms a legal document and penalties exist for providing false or misleading information
- I am over 18 years at the time of completing this application

By marking this checkbox I confirm that I have read and understood all the statements above *

Name of person completing this application *

Date *

Signature of person completing this application *

Privacy Statement

The information gathered in the form is used by Council to process the application. To view Council's privacy policy, please either visit Council's offices or go to Council Privacy statement located at: www.benalla.vic.gov.au.

Lodgement

If you intend to post or fax this form please use the details provided below:

Benalla Rural City Council
PO Box 227
Benalla Vic 3671

Telephone: 03 5760 2600
Fax: 03 5762 5537
Email: council@benalla.vic.gov.au
Website: www.benalla.vic.gov.au

