

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

Benalla Rural City Council

Tel: 03 5760 2600

www.benalla.vic.gov.au

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

Council Specific Information

Please use this form to apply to Benalla Rural City Council to transfer the registration of a prescribed accommodation premises from the current to new proprietor under the *Public Health and Wellbeing Act 2008*.

Applicant Details

Existing Proprietor

Is this proprietor a contact for this application?

Yes

No

Title*

Surname*

Given Names*

ABN

ACN

Business Name

Company Name

Address

PO Box

GPO Box

Private Bag

Locked Bag

RRN

RSD

Street Address/ Postal Address*

Suburb / Town*

State*

Postcode*

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

Business Phone

After hours phone

Mobile

Email

Existing Proprietor 2 (if applicable)

Title Surname Given Names
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

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

Business Phone After hours phone Mobile
() ()

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 Mobile
() ()

Email

Proposed (New) proprietor details

Proprietor (If there is more than one proprietor of the business, complete details for each below)

Title* Surname* Given Name(s) *

ABN ACN

Business Name Company Name

Address

PO Box GPO Box Private Bag Locked Bag RRN RSD

Street Address *

Suburb / Town State Postcode

Business Phone After hours phone Mobile

 () ()

Email

Proprietor 2 (if applicable)

Title Surname Given Name(s)

ABN ACN

Business Name Company Name

Address

PO Box GPO Box Private Bag Locked Bag RRN RSD

Street Address

Suburb / Town State Postcode

Business Phone After hours phone 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)*

Prescribed accommodation details

Will the premises provide packaged food to guests and/or the public? *

Yes No

If yes, free notification in accordance with the Food Act has been provided.

Will the premises handle unpackaged food for consumption by guests and/or the public? *

Yes No

If yes, please complete an Application to Transfer the Registration of a Food Related Premises

Please specify the type of accommodation *

Hotel/Motel

Hostel

Student Dormitory

Holiday Camps

Rooming House

Other (please specify)

Maximum number of guest accommodated *

Number of rooms

Payment Details

Fees & Charges - 2023/2024

Transfer of Registration Fee - Motels, Hotels, School Camps	\$95
Pre-purchase Inspection Report - Motels, Hotels, School Camps	\$95
Pre-purchase Inspection Report required within 7 days – additional \$25	\$120
Transfer of Registration Fee - B&B > 5 People Accommodated (Unsewered with a private water supply)	\$0
Pre-purchase Inspection Report - B&B > 5 People Accommodated (Unsewered with a private water supply)	\$0
Pre-purchase Inspection Report required within 7 days – additional \$25	\$0
Transfer of Registration Fee - B&B > 5 People Accommodated (in Town)	\$0
Pre-purchase Inspection Report - B&B > 5 People Accommodated (In Town)	\$0
Pre-purchase Inspection Report required within 7 days – additional \$25	\$0
Optional Transfer of Registration Fee - B&B < 6 People Accommodated (Unsewered with a private water supply)	\$0
Optional Pre-purchase Inspection Report - B&B < 6 People Accommodated (Unsewered with a private water supply)	\$0
Pre-purchase Inspection Report required within 7 days – additional \$25	\$0
Optional Transfer of Registration Fee - B&B < 6 People Accommodated (In Town)	\$0
Optional Pre-purchase Inspection Report - B&B < 6 People Accommodated (In Town)	\$0
Pre-purchase Inspection Report required within 7 days – additional \$25	\$0

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 www.benalla.vic.gov.au

Lodgement

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

Benalla Rural City Council
PO Box 227
Benalla VIC 3671

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