

Public Health Registration

(Public Health Act 2010, Public Health Regulation 2012)

NOTE: The occupier of a premises at which a public swimming pool/spa pool is situated, a water-cooling or warm-water system is installed, or where skin penetration procedures are carried out must notify the Local Government Authority for the area within 7 days of any change of particulars provided to the authority on this form.

I. BUSINESS DETAILS

Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/>	Full Name: _____
BUSINESS NAME: _____	
ABN/ACN: _____	
NAME OF PROPRIETOR: _____	
LOCATION OF PREMISES: _____	

2. OCCUPIER CONTACT DETAILS

Mr <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/>	Full Name: _____
RESIDENTIAL ADDRESS: _____	
Phone (W): _____ Phone (H): _____ Mobile: _____	
Email: _____	

3. TYPE OF BUSINESS/NOTIFICATION (please complete the appropriate details)

<input type="checkbox"/> HAIRDRESSING/BARBER
<input type="checkbox"/> BEAUTY SALON
<input type="checkbox"/> WATER COOLING/WARM WATER SYSTEM Type of system in use: _____
<input type="checkbox"/> SKIN PENETRATION PROCEDURES Type of procedures in use: <input type="checkbox"/> Waxing <input type="checkbox"/> Piercing <input type="checkbox"/> Manicure/Pedicure <input type="checkbox"/> Tattoo <input type="checkbox"/> Blood Testing <input type="checkbox"/> Needling <input type="checkbox"/> Other: _____
<input type="checkbox"/> PUBLIC SWIMMING POOL OR SPA: _____
<input type="checkbox"/> WATER CARTING (POTABLE). WHERE OBTAINING WATER FROM: _____

Office use only

Register No: _____	Date received: _____
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