

APPLICATION FOR PLANS ASSESSMENT PUBLIC HEALTH AND WELLBEING ACT 2008

PRESCRIBED ACCOMMODATION

FORM VALID FROM 1 JULY 2023 TO 30 JUNE 2024



This application cannot be processed without a copy of plans and the correct fee. If sending via email, send to health@melbourne.vic.gov.au

TYPE OF SERVICE REQUESTED (please tick box)

- Priority Service**
(5 working days - double the fee) **OR** **Standard**
(15 working days)

The 5 or 15 working day timeframe is for your plans (or the initial on site assessment) to be processed and assessed. This does not include the time taken to conduct prefinal and final inspections and approval of registration.

Note: The priority service will commence on receipt of payment

REGISTRATION TYPE

- New premises** **OR** **Alterations to existing premises registered with City of Melbourne**

Registration No.

APPLICANT DETAILS

Applicants Name(s)

Applicants Postal Address

Postcode

ABN Email

Phone Mobile

Address of Project

Trading name of business
(proposed or existing)

Applicant involvement Owner Occupier Architect

Other (please specify)

Proprietor's Name

Proprietor's Phone No.

Signature (applicant)

Print Name

Date

OFFICE USE ONLY

Date Processed	Registration #	EHT	DM#
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PRESCRIBED ACCOMMODATION DETAILS

Class of accommodation (please tick)

<input type="checkbox"/> Hotel/Motel	<input type="checkbox"/> Student dormitory	Number of bedrooms	<input type="text"/>
<input type="checkbox"/> Hostel	<input type="checkbox"/> Holiday camp	Maximum no. of occupants	<input type="text"/>
<input type="checkbox"/> Rooming House	<input type="checkbox"/> Residential accommodation	Is the accommodation provided to employees as part of their employment?	<input type="checkbox"/> Yes <input type="checkbox"/> No

If you are the proprietor of a rooming house, are you also the property owner? Yes No

If no, please provide details of the property owner below.

Company Name	<input type="text"/>		
Company Contact	Given Names <input type="text"/>	Family Name	<input type="text"/>
ABN/ACN	<input type="text"/>	Date of Birth	<input type="text"/>
Postal Address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>

PAYMENT DETAILS

Type of Premises (Tick <input checked="" type="checkbox"/> one)	
Prescribed accommodation	\$315.00
For Priority Service for any of the above applications	DOUBLE THE FEE ABOVE
Total Fee Payable	\$

FURTHER INFORMATION

Telephone enquiries: (03) 9658 8831

MAIL

Health and Wellbeing Branch
City of Melbourne
GPO Box 1603
Melbourne VIC 3001

EMAIL

health@melbourne.vic.gov.au

ONLINE PAYMENTS ARE HERE

In order to provide you with a more secure and streamlined service, we have introduced online payments for this type of application.

Upon submission of your completed form, you will receive a payment link via email. Payment can then be made online by credit card only.

Once payment is received your application will progress.

This information is collected under the requirements of the Food Act 1984/ Public Health and Wellbeing Act 2008 for enforcement and public health purposes. It may be provided to the Department of Health & Human Services (DHHS) for the same purposes, and for statistical purposes related to the application of the Acts. It will be treated in compliance with the Privacy and Data Protection Act 2014 (PDPA) and the Information Privacy Principles contained in Schedule 1 of the PDPA. It will also be used to contact you concerning food safety initiatives, education and training provided by the City of Melbourne. Council will take all necessary measures to prevent unauthorised access to or disclosure of your personal information and will not disclose it to any external agencies unless required or authorised by law.

For details of external organisations to whom this personal information may be disclosed and to find out how to access or modify any personal information you have supplied please see Council's Privacy Policy Statement at melbourne.vic.gov.au