# APPLICATION FOR TRANSFER OF REGISTRATION PUBLIC HEALTH AND WELLBEING ACT 2008

CATEGORY 1 AQUATIC FACILITY FORM VALID FROM 1 JULY 2023 TO 30 JUNE 2024



#### Complete all sections

### SECTION 1 - TO BE COMPLETED BY THE NEW PROPRIETOR

### **PROPRIETOR DETAILS - IF REGISTERING AS A COMPANY:**

Company Name	
ABN/ACN	
Company Contact	Given Names Family Name
Position	
Postal Address	
	Postcode
Phone	Mobile
Email	

### **PROPRIETOR DETAILS - IF REGISTERING AS AN INDIVIDUAL:**

Given Names	Family Name
Postal Address	
[	Postcode
Phone	Mobile
Email	
PREMISES DETAILS:	
New Business Name	Registration No.
Previous Business Name	
Premises Address	
Postal Address	
	Postcode
ABN	
Premises Phone No.	

**OFFICE USE ONLY** 

Date Processed	Registration #	EHT/EHO	DM#
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### SECTION 2 - AQUATIC FACILITIES LOCATED AT THE PREMISES

Number of aquatic facilities located at the premises: (please select all that apply)

Number of Swimming Pool(s)		
(a) swimming;	Number of Spa Pool(s)	
(b) diving;	Number of Interactive Water Feature(s)	
(c) recreational or therapeutic bathing;	Number of Other Aquatic Facilities	
(d) hydrotherapy;		
(e) exercise;		
(f) paddling;		
(g) wading		

# SECTION 3 - WATER QUALITY RISK MANAGEMENT PLAN

Does a current water quality risk management plan exists for each aquatic facility located at the premises?

# SECTION 4 - AQUATIC FACILITY OPERATOR

If you are the proprietor of an aquatic facility, are you also the aquatic facility operator? 🗌 Yes 🗌 No			
If no, please provide details of the aquatic facility operator below:			
Company Name			
Company Contact	Given Names Family Name		
ABN/ACN	Date of Birth		
Postal Address			
	Postcode		
Phone	Mobile		
Email			

## SECTION 5 - TO BE COMPLETED BY THE NEW BUSINESS OWNER

Signature (applicant)		
Print Name	Date	
Signature (applicant)		
Print Name	Date	

# SECTION 6 - TO BE COMPLETED BY THE CURRENT REGISTERED BUSINESS OWNER

Signature (applicant)		
Print Name		Date
Company Name		
Position in Company	Contact Phone No.	
Signature (applicant)		
Print Name		Date
Company Name		
Position in Company	Contact Phone No.	
	Where the applicant is a company, the signature must be of an authorised o	fficer of that company.
Date of transfer of busir	ness	

# PAYMENT DETAILS

Transfer Fee Payable Category 1 Aquatic Facility \$14**5**.00

### **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.

## FURTHER INFORMATION

Telephone enquiries:

### 🖃 MAIL

Health and Wellbeing Branch City of Melbourne GPO Box 1603 Melbourne VIC 3001 (03) 9658 8831

### 🖂 EMAIL

health@melbourne.vic.gov.au

### DEFINITIONS

**category 1 aquatic facility** means a swimming pool, spa pool or interactive water feature that— (a) is used by members of the public, whether free of charge or on payment of a fee; or (b) is used in association with a class or program that is offered free of charge or on payment of a fee; or (c) is located at the premises of an early childhood service, school or other educational institution; or

- (c) is located at the premises of an early childhood service, school or other educational i
- (d) is located at premises at which residential aged care services are provided; or
- (e) is located at any of the following premises-
- (i) a public hospital;
- (ii) a multi purpose service;(iii) a denominational hospital;
- (iv) a private hospital;

(v) a privately-operated hospital within the meaning of section 3(1) of the Health Services Act 1988;

category 2 aquatic facility means a swimming pool or spa pool that is used by members of the public and located at the premises

#### of the following-

- (a) a residential apartment complex;
- (b) a hotel, motel or hostel;

**swimming pool** means any artificial structure containing water that is used or intended to be used by people for any of the following– (a) swimming;

- (b) diving;
- (c) recreational or therapeutic bathing;
- (d) hydrotherapy;
- (e) exercise;
- (f) paddling;
- (g) wading

### **spa pool** means an artificially constructed pool that—

(a) has facilities for circulating heated turbulent water; and

(b) is used or intended to be used for passive recreational or therapeutic bathing;

### interactive water feature means any of the following-

(a) a water slide and its associated receiving pool that uses recirculating water;

(b) a wave pool or water play park that uses recirculating water;

(c) any other artificially constructed water play feature where recirculating water may be inhaled or swallowed by a person or come into contact with a person's skin or mucous membranes;

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.

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