

Premises Application – Public Health & Wellbeing

Thank you for your initial enquiry regarding a business within the City of Whitehorse.

To assist you in understanding the requirements to register a premises visit Council's website at
<https://www.whitehorse.vic.gov.au/living-working/business>

Premises Details:						
Trading Name (if known):						
Premises Address:		Suburb	Postcode			
Postal Address: (If different to above)		Suburb	Postcode			
New Premises - Business with no current Food Registration within Council						
Is this a new premises? **All new premises may be subject to planning and building approval	<input type="checkbox"/> Yes	*It is recommended a Pre- Registration Plans Assessment be completed– please refer to fee schedule Do you want to proceed with a Plans Assessment? <input type="checkbox"/> Yes		<input type="checkbox"/> No		
Existing Premises - Business with current Food Registration within Council or within last 6 months & change of business ownership						
Is this an existing premises?	<input type="checkbox"/> Yes	<input type="checkbox"/> No				
If purchasing the business, what is the settlement date?		What is expected first date of trading? Premises must be registered prior to this date				
If purchasing the business, would you like a Pre Sale Inspection?	<input type="checkbox"/> Yes * Pre - Sale Fees payable – please refer to fee schedule			<input type="checkbox"/> No		
Will you be making alterations to the floor plan and require plans to be assessed?	<input type="checkbox"/> Yes * Fees payable for alterations – please refer to fee schedule **All alterations may be subject to planning and building approval			<input type="checkbox"/> No		
Type of Premises:(please tick)						
Prescribed Accommodation	<input type="checkbox"/> Motel/Hotel	<input type="checkbox"/> Residential Accommodation		<input type="checkbox"/> Hostel		
	<input type="checkbox"/> Rooming House	<input type="checkbox"/> Student Dormitory		<input type="checkbox"/> Holiday Camp		
Hairdressing, Beauty & Body Art	<input type="checkbox"/> Hairdresser	<input type="checkbox"/> Body Piercing	<input type="checkbox"/> Ear Piercing	<input type="checkbox"/> Tattooist		
	<input type="checkbox"/> Beauty	<input type="checkbox"/> Nail Treatment	<input type="checkbox"/> Facials	<input type="checkbox"/> Waxing		
	<input type="checkbox"/> Make Up	<input type="checkbox"/> Colonic Irrigation	<input type="checkbox"/> Laser	<input type="checkbox"/> Cosmetic Tattooing		
	<input type="checkbox"/> Other (please specify)					
Aquatic Facility	<input type="checkbox"/> Category 1 Used by members of the public, used in association of a class or program, is located at premises of educational facility including early learning services, aged care or hospital facility		<input type="checkbox"/> Category 2 a swimming pool, spa or interactive water feature used by members of the public which is located at a residential apartment complex or a hotel, motel or hostel			
Proprietor Details:(legal entity – cannot be a trust)						
Proprietor Type: (please tick)	<input type="checkbox"/> Individual -	Name	ABN			
	<input type="checkbox"/> Company	Name	ABN/	ACN		
	<input type="checkbox"/> Partnership	Name 1	Name 2			
	<input type="checkbox"/> Trustee	Trustee Name:		ABN		
Email			Mobile			
Applicants Details						
Applicants Name						
Applicant's involvement:	<input type="checkbox"/> Owner	<input type="checkbox"/> Builder	<input type="checkbox"/> Occupier	<input type="checkbox"/> Architect	<input type="checkbox"/> Purchaser	<input type="checkbox"/> Other (please specify)
Email:			Mobile:			

Processing Information (Complete this section for Hairdressing, Beauty & Body Art Only) Please tick all that apply					
<input type="checkbox"/> double bowl sink	<input type="checkbox"/> dedicated hand wash basin	<input type="checkbox"/> storage area for equipment and products only used for the business			
<input type="checkbox"/> single bowl sink	<input type="checkbox"/> sink for disposing waste water	<input type="checkbox"/> dedicated staff dishes sink			
Home Based Business (Complete this if you are operating from home)					
Do you live in the house at address of the business?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Do you own or rent the house at address of the business?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
How many staff will work at the premises?		What are your hours of operation?			
Type of dwelling:	<input type="checkbox"/> House	<input type="checkbox"/> Apartment/townhouse	<input type="checkbox"/> Unit		
Please attach a copy of your house floor plan and show what rooms you will use for your business. Plans attached		<input type="checkbox"/> Yes		<input type="checkbox"/> No	
Size of Dwelling	Number of Bedrooms		Number of Bathrooms		
Number of Living Rooms (lounge/dining)		Garage		<input type="checkbox"/> Yes	<input type="checkbox"/> No
List the rooms you will be using for your business and describe how each room will be used, eg kitchen and bedroom 1 will be used for storage					
Do you need to connect to additional services to operate your business? For example car parking, installation of a flue over cooking equipment, connection of 3 phase power?		<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify			
Describe how will your proposed business impact on your neighbours? For example noise, customer parking, waste					
Will you store equipment or goods associated with the business?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, can they be seen from the street?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you providing signage?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what size if the signage?		
Are you making structural changes to the layout of the dwelling?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please describe		
Are you using an external shed or building for the use of the business?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please describe type of building and the size of the building		
Fees 01 July 2022 – 30 June 2023					
If you have ticked any of the below options, you will receive an invoice via email for payment. Once payment is received the Environmental Health Officer will proceed with your application.					
Pre Registration Plans assessment and progress inspections		\$218.00			
Council strongly recommends that you submit plans before applying for registration. This will assist in approving your registration efficiently by ensuring that the premises complies with relevant standards and to minimise the risk of having to undertake costly remedial work. The service also incorporates the costs associated with onsite progress and final inspections.					
Alterations to existing premises		\$86			
This fee is applicable to alterations made on existing premises. All alterations are subject to Planning and Building approval					
Pre Sale Inspection		\$262 within 10 working days or \$524 Priority service			
If you are purchasing a premises you may request a presale inspection. An inspection before settlement ensures that prospective proprietors are fully informed of any outstanding items or notices to ensure compliance with relevant legislation. Due to privacy laws, the current proprietor must sign to give consent to release the report to you or your solicitor					
Planning and Building Requirements					
If you are setting up a new business or altering an existing business you must first contact Council's Town Planning and Building Department to obtain written information as to whether:					
<ul style="list-style-type: none"> a planning permit is required for the proposed use and/or development and a building permit is required for the proposed premises (if required provide a copy of the building permit with the endorsed plans) 					
<input checked="" type="checkbox"/> I have contacted the following Council departments and authorities to ensure that I have obtained all relevant permit/application information:					
<input type="checkbox"/> Council's Statutory Planning Unit 9262 6333					
<input type="checkbox"/> Council's Building Services Unit 9262 6333					
<input type="checkbox"/> Yarra Valley Water Trade Waste Team..... 9872 1240					

The personal information requested above is for the purpose of administering the Public Health & Wellbeing 2008 and will be used solely by Council for that primary purpose or directly related purposes. The intended recipients of the information are Council officers. Council may disclose the information to law enforcement agencies, courts and other organisations authorised to collect it. Individuals have a right to seek access to their personal information and make corrections by contacting Council's Environmental Health Unit on 9262 6197. You may view Council's Privacy Policy on our website www.whitehorse.vic.gov.au or obtain a copy from any of the Council office