

APPLICATION FORM

CONSENT TO ESTABLISH AN OFFENSIVE TRADE

SCHEDULE 9

For the purpose of applying in conjunction with the section 187 of the *Health (Miscellaneous Provisions) Act 1911*.

APPLICANT DETAILS			
Applicant Name			
Contact Number			
Email Address			
Postal Address			
	Suburb		Postcode
OFFENSIVE TRADE DETAILS			
Description of Offensive Trade			
Premise Address			
	Suburb		Postcode
NOTICE OF INTENTION TO MAKE THIS APPLICATION WAS ADVERTISED IN			
Name of Newspaper			
Date of Advertisement			
DECLARATION			
<input type="checkbox"/>	I declare as the Applicant, all the information supplied on this form is true and correct.		
<input type="checkbox"/>	I have attached plans and specifications of the building proposed to be used or erected in connection with the proposed offensive trade.		
<input type="checkbox"/>	I understand that the City will action this form within 15 working days.		
Signed		Date:	

Fees: As indicated in the City's Schedule of Fees and Charges

COA: 22010213

Receipt Number: _____