

TRIM Reference: _____



APPLICATION FOR RENEWAL OF REGISTRATION OF A LODGING HOUSE

Schedule 6 – City of Greater Geraldton Health Local Law 2014

APPLICANT DETAILS

Applicant Name: _____

Address: _____

Postal Address: _____

Phone Number: _____ Mobile Number: _____

Email Address: _____

LODGING HOUSE DETAILS

Business Name: _____

Address: _____

Phone Number: _____ ABN: _____

Email Address: _____

LODGING HOUSE TO BE CLASSIFIED AS *please tick which is to apply*

- | | |
|--|--|
| <input type="checkbox"/> A Lodging House | <input type="checkbox"/> A Recreational Campsite |
| <input type="checkbox"/> A Short-Term Hostel | <input type="checkbox"/> Serviced Apartments |

APPLICATION FEE

Registration/Inspection: \$250.00

The application will NOT be approved until payment has been made.

Name: _____

Signature: _____ Date: _____

OFFICE USE

GL Account No: **5500-100058-43310** Date Paid: _____

Receipt Number: _____ Officers Initials: _____

