

# APPLICATION FOR REGISTRATION

Health (Registration of Premises) Regulations 1966



## PREMISES DETAILS

Premises: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Occupier: \_\_\_\_\_

Phone: \_\_\_\_\_

Premises Address: \_\_\_\_\_  
(if different from Postal Address)

Valuation Reference No: \_\_\_\_\_  
(off rates instalment notice)

NOTE: The "Occupier" is the person, company, partnership of others, who are responsible for the operation of the business. The Registration Certificate will be issued to the Occupier.

## REGISTRATION DETAILS

BOARDING HOUSE

CAMPING GROUND

FUNERAL DIRECTOR:

HAIRDRESSER:

OFFENSIVE TRADE

AUCTION MART:

OPERATION OF VENDING MACHINE

TRANSFER OF OWNERSHIP:

DUPLICATE CERTIFICATE:

### Office Use Only

Debtor No:

Certificate No:

Receipt No:

Date:

## PAYMENT DETAILS

Total fee payable to OTOROHANGA DISTRICT COUNCIL: \$\_\_\_\_\_ (inclusive of GST)

Tax Invoice Otorohanga District Council Registration Number: 10-962-633

## DECLARATION

I, \_\_\_\_\_, hereby state that the aforesaid particulars are true and correct, and I now make application for a Certificate of Registration to be issued to the occupier specified.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date