

Registration of Prescribed Accommodation

Public Health and Wellbeing Act 2008



Proprietor/accommodation details:

First name:	Surname:
Trading name:	
Australian Business Number (ABN):	
Business address:	
	Postcode:
Postal address:	
	Postcode:
Contact number:	
Email address:	
Type of prescribed accommodation:	
How many bedrooms are there?	

I hereby apply to register the above prescribed accommodation for the year ending ____/____/20____ under the requirements of the *Public Health and Wellbeing Act 2008*.

Signature:
Name: _____ Date: ____/____/____

Office Use Only:	
CS Stamp:	IM Stamp:

Contact Council

- ☎ **Phone:** 03 5153 9500
- @ **Email:** feedback@egipps.vic.gov.au
- 🌐 **Website:** eastgippsland.vic.gov.au
- ✉ **Mail:** PO Box 1618, Bairnsdale VIC 3875

Customer Service Centres:

- **Bairnsdale:** 273 Main Street
- **Lakes Entrance:** 18 Mechanics Street
- **Mallacoota:** 70 Maurice Avenue
- **Omeo:** 179 Day Avenue
- **Orbost:** 1 Ruskin Street
- **Paynesville:** 55 Esplanade

Collection notice:

East Gippsland Shire Council collects information provided by you in this form to assess your registration of prescribed accommodation under Public Health and Wellbeing Act 2008. East Gippsland Shire Council will only disclose your personal contact information to a third-party where required to do so by law. Information shared in this situation will be in accordance with the requirements of the Privacy and Data Protection Act 2014. If incorrect information or details are provided Council will be unable to assist you with this request. For more information on Council's Privacy Policy, please visit Council's *Privacy Statement* on our website or email feedback@egipps.vic.gov.au if you have any questions. SEP 26