Application for Premises Enquiry





Part 1 - Applicant de	tails	_								
Applicant's name:										
Applicant's address:										
		Suburb					Postcode			
Applicant's phone num	ber:									
Applicant's email addre	ess:									
How would you like to receive the premises				enquiry report:	☐ Po	ost	☐ Email			
Part 2 - Current pro	orieto	or details								
Proprietor's name:										
Business trading name	:									
Premises address:										
Registration number:										
any person or his agenconducted thereat, of a connection with the ac Residential Tenancies A	any in Iminis	formation o tration of th	r do e <i>Fo</i>	cument obtained bood Act 1984, the F	oy an authorised Public Health an	d office of d Wellbei	the Knox C	ity Cou	ıncil in	
Name of current proprietor				Signature of current proprietor			Date			
				_						
Note to applicant: This 2008 and the Residentiand Fire Safety, you are	ial Ter	nancies Act 1	997	only. For information	tion regarding c	-			•	
Fee due:		\$395.00	(4	business day tur	naround)					
(please indicate)		\$290.00	(10	0 business day tu	ırnaround)					
		\$130.00	(2 ^r	nd & subsequent	requests)					
Fee is GST inclusive and is valid from 1 July 2024 to 30 June 2025.										

To make payment, please contact Knox City Council Health Services at health.services@knox.vic.gov.au to request an invoice or call on 9298 8000