## **HW20**

TRIM Reference:		



## APPLICATION FOR RENEWAL OF REGISTRATION OF A LODGING HOUSE

Schedule 6 - City of Greater Geraldton Health Local Law 2014

APPLICANT DETA	ILS			
Applicant's Name:				
Residential Address:				
Postal Address:		if different to	above	
Phone Number:		Mobile Number:		
Email Address:				
LODGING HOUSE	E DETAILS			
Business Name:				
Address:				
Phone Number:		Mobile Number		
Email Address:				
Lodging House to b	e classified as: please tick	which is to apply		
A Lodging Ho	ouse [	A Recreational Campsite		
A Short-Term	Hostel [	Serviced Apartments		
Name:	_			
Signature:		Date:		
APPLICATION FEE	E			
Registration/Inspe	ction			
Applic	cation will NOT be approved u	ntil payment has been made.		
	OFFICE	USE		
Date Paid:		Receipt Number:		
Account No:	07220803	Officer's Initials:		

