

## **Health Premises Registration**

				Effectiv	re from July 2025 to June 2026	
File reference: (Office Use Only)						
<b>About this form</b> Use this form to registe hair salon to Woollahra	er the operation of and provide deta Municipal Council.	ails of tl	he proprietor of a sk	in penetration	premises, beauty and/or	
	h Officer may require proof of Plac er Service Centre on (02) 9391 70					
Premises Proprieto	r's details					
Title:						
Name of Proprietor:				ABN / ACN:		
Address:						
Phone:	Email:					
Business details <i>(P</i>	rovide the address of where the	e prem	ises operates and	other busine	ess related details)	
Business name:						
Business address:						
Company name:				ABN / ACN:		
Phone:			Emai	l:		
Contact: (only if company)		ı	nsurance Policy no	<b>D</b> :		
Activities proposed (	ick all that apply)					
☐ Skin penetration (in	ncluding tattooing, piercing, needli	ing, land	cing, scarification, co	olonic irrigation	n, electrolysis etc)	
☐ Manicure/Pedicure						
☐ Hair removal (inclu	ding waxing, threading, tweezing)					
☐ Beauty treatments	(including facials, baths, exfoliation	ns, tintii	ng etc)			
☐ Hairdressing/barbe	г					
Other (specify)						

Consent details	S								
		o operate, approved hour	rs of operation.						
	•		•	t consent exists or	r existing use rights apply				
Development Co	nsent no:								
Hours of operation approved under Development Cor									
Opening hours:		Construction Certificate no: (New premises)							
Description of sa that currently has Development Co	S								
Diagram/plan of	premises la	ayout attached:	s 🗌 No						
Signatures			_	_					
does not authorise	e commence	provided in this form is true ement of operations. Ope mises and confirmed the	erations should not c	ommence until a F					
Name				Date					
Fees									
					a valid development consent dout by Council's Food &				
		S111.55 for an inspection ver 30 minutes (including		cluding travel time	) and \$213.40 per hour or				
Privacy and co	nditions o	f use							
For more informat	tion about P	rivacy & Personal Inform	ation Policy: <u>www.w</u>	oollahra.nsw.gov.a	<u>au/privacy</u> .				
Lodgement det	ails								
Who to contact:	The Food & Health Officer in the Compliance Department handling your registration and subsequent inspections.								
	If you wish to	f you wish to discuss a proposal with Council's Food & Health Officer, it's essential that you arrange an appointment. We ecommend that you consult with the Food & Health Officer before lodging this form.							
	ou should speak with Council's a fee is payable for this service.								
Mail to:		Municipal Council Double Bay 1360	In person:	Council Chambe 536 New South Double Bay NSV	Head Road				
Email:	records@v	voollahra.nsw.gov.au	Telephone:	(02) 9391 7000					

Website:

www.woollahra.nsw.gov.au

**Payment methods:** No payment is required when lodging this form.