Bulloo Shire Council

53 Dowling Street, Thargomindah PO Box 46, Thargomindah QLD 4492

Telephone 07 4621 8000 Facsimile 07 4655 3131

council@bulloo.qld.gov.au Email

www.bulloo.qld.gov.au Website



Public Health (Infection Control for Personal Appearance Services) Act 2003

Higher Risk Personal Appearance Services -Amendment

Application to amend a Licence to Carry on Business Providing Higher **Risk Personal Appearance Services**

Contact Council if you have any specific enquiries regarding fees or how to complete this

	form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.				
	Application is for				
	Higher Risk Personal Appearan	ce Services Amendment	Fee \$		
	Applicant/s details				
If applicant is a company, insert company name and ACN / ARBN.	Company name		ACN / ARBN		
	Title (e	g. Mr, Mrs, Miss etc.)			
If applicant is a Company / Corporation, director's names must be included.	Family name				
	Given names Position				
	I being a current licence holder hereby make application to amend this licence.				
	Signature	,	Date		
	Title (e	g. Mr, Mrs, Miss etc.)			
	Family name Given names				
	Position I being a current licence holder hereby make application to amend this licence.				
	Signature	make application to amona the	Date		
	Contact details				
Select as applicable.	☐ Business ☐ Private				
	Contact person Postal address				
	Land'to / Outon	Otata	Bostovilo		
	Locality / Suburb	State	Postcode		
	Contact ph.	Mobile			
	Contact fax	Email			

Fixed premises Business name must be	Business details				
registered with Fair Trading.	Business name		BN		
If more than one premises, please attach additional	If the amendments involve changing the location of the premises shown on the licence, or adding additional premises, please complete the following				
information to this form.	Street address				
If applicant is a company insert registered address of	Locality / Suburb	State	Postcode		
Company / Corporation.	Postal address (for service of documents)				
Enter postal address if different from street address.	Locality / Suburb State Pos		Postcode		
	Contact ph.	Mobile			
	Contact fax	Email			
Real property description - refer to Rates Notice.	Lot no.	Reg. plan no.	Parish		
Higher Risk Personal Appearance Services Licence No.	Licence no.				
Mobile premises	Description of the premises (eg vehicle, caravan details)				
	Vehicle registration no.				
	Address where the mobile premises may be inspected				
	Locality / Suburb	State	Postcode		
	Amendments Provide details of proposed amendments				
	Lodgement				
	Please attach the following if amendments involve changing the location of the premises or adding additional premises:				
	 A plan drawn to scale, not smaller than one to fifty (1:50) of the proposed premises. Details including bench surface material, location of hand basin, etc should be included. Additional premises details (if applicable). 				
	Please note: This application and fee MUST be lodged with your Council				
	The information will only be accessed a third party outside the process of control of the process of the proce	nal information in accordance with current ed by authorised council employees. Your p dealing with your application, except where required by Queensland State Governmer	personal details will not be disclosed to required by legislation (including the		