Application for Premises Enquiry





Part 1 - Applicant details				
Applicant's name:				
Applicant's address:				
	Suburb			Postcode
Applicant's phone number:				
Applicant's email address:				
How would you like to receiv	like to receive the premises enquiry report:			☐ Email
Part 2 - Current proprietor details				
Proprietor's name:				
Business trading name:				
Premises address:				
Registration number:				
I, the proprietor of the premises named in 'Part 2 - Current proprietor details', hereby consent to the disclosure to any person or his agent purporting to have an interest in purchasing the above property and/or business being conducted thereat, of any information or document obtained by an authorised office of the Knox City Council in connection with the administration of the Food Act 1984, the Public Health and Wellbeing Act 2008 and the Residential Tenancies Act 1997, to the person named in 'Part 1 - Applicant details'.				
Name of current proprietor		Signature of curr	ent proprietor	///
Note to applicant: This report is limited to compliance with the <i>Food Act 1984</i> , the <i>Public Health and Wellbeing Act 2008</i> and the <i>Residential Tenancies Act 1997</i> only. For information regarding compliance with Building Regulations and Fire Safety, you are advised to seek the services of a qualified surveyor.				
_		(4 business day tur (10 business day tu	•	
,		(2 nd & subsequent		

Knox City Council, ABN 24 477 480 661, 511 Burwood Highway, Wantirna South Victoria 3152, Telephone 03 9298 8000, Fax 03 9800 3096, Email knoxcc@knox.vic.gov.au, DX 18210 KNOX, knox.vic.gov.au

To make payment, please contact Knox City Council Health Services on 9298 8000 or at

Fee is GST inclusive and is valid from <u>1 July 2023</u> to <u>30 June 2024</u>.

health.services@knox.vic.gov.au to request an invoice.