



REQUEST FOR INSPECTION OR ASSESSMENT OF PROPOSAL

1. APPLICANT DETAILS

I (Applicant/Agent name): _____
Address of Applicant: _____
Postal Address: _____
Telephone: _____
E-mail: _____

2. PROPERTY WHERE INSPECTION IS REQUESTED

Unit No: _____ Street No: _____ Street Name: _____
Suburb: _____ Postcode: _____
Reason for inspection: _____
Signature: _____ Date : _____

3. PARTICULARS REQUESTED

2024-25 FEES INCL GST

- | | |
|---|----------|
| <input type="checkbox"/> Inspection for future Food Act Premises | \$212.00 |
| <input type="checkbox"/> Inspection for future Public Health & Wellbeing Act Premises | \$212.00 |
| <input type="checkbox"/> Other Inspection (e.g. Amendment to existing premises) | \$212.00 |
| <input type="checkbox"/> Assessment of Proposal for Mobile Hairdressing | \$212.00 |

Agents

A person shall not act as the agent of an owner or other person having equity in the property unless he/she is authorised in writing by the owner to do so.

Office Use Only

Date: _____ Application ID: _____
Amount Received: _____ Receipt Number: _____

Charge Types: Food Act – HLFReqIns OR Public Health & Wellbeing Act – HLHReqIns

Your personal information is being collected by Wyndham City Council under the laws administered by Local Government. Your information will be stored in Council's Customer Database and used to deliver Council services to you in accordance with Council's Privacy Policy. For further information on how your personal information is handled, visit Council's Privacy Policy at http://www.wyndham.vic.gov.au/aboutwyndham/wyndhamcity/customerservice/information/privacy_policy

4. CURRENT OWNERS CONSENT & DETAILS (if applicable)

First Name & Surname _____

Company Name: _____

Business Trading Name: _____

Trading Address: _____

Current Registration Number _____

Contact Number _____

E-mail: _____

5. DECLARATION

By signing the declaration below, I provide authority and consent for Wyndham City to disclose business details, information and documents to the applicant, inclusive of information documentation obtained during the administration of the Food Act 1984.

Business Owner One:

Print business owner name/Company Name: _____

Signature _____

Date _____

Business Owner two:

Print business owner name/Company Name: _____

Signature _____

Date _____

Agents

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How to lodge your application

By email	In person	By mail
mail@wyndham.vic.gov.au	Wyndham City Council 45 Princes Hwy Werribee VIC 3030 8.00am to 4.30pm Monday to Friday	P.O Box 197 Werribee VIC 3030

If you need to speak with us, please call 1300 023 411 to be transferred to the relevant department.