

# Application – Submission of Plans for a Personal Appearance Services Premises

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

You must complete all questions unless the form indicates otherwise. Incomplete forms or forms without all necessary information and documentation will result in your application being an improperly made application.

Please:

- complete the form and return to Council; and
- provide any mandatory supporting information identified on the application form; and
- submit the applicable fee

**Processing of Plans** Please complete all sections of the form

## 1. APPLICANT DETAILS

**Note:** The applicant is the person who will hold the permit and will be legally responsible for complying with the applicable conditions. A business name or trust is not a legal entity and should not be entered in this field as the applicant. Where a person or company operates a business, the applicant is the person or company.

*Example – Jane Bloggs & Joe Bloggs, Joe Bloggs Pty Ltd, Jones Ltd, The Business Inc.*

**Applicant (Entity) Name:**  
 (Individual/Partnership/Corporation)

**Is the Applicant a Not for Profit (Community, Sporting or Service) Organisation?**  Yes  No

If Yes, Please attach a certificate of incorporation to this application

**Applicant Postal Address:**

Does this postal address apply to all Council Departments (i.e. rates, water, permits, animals etc.)  Yes  No

**Applicant Registered Office Street Address:**

**Applicant Phone Number:**

**Applicant Mobile:**

**Applicant Email Address:**

**Applicant Contact Name if not an Individual:**

**For Corporations, please provide the following information. For additional names, please attach.**

**Director Name:**

**Director Address:**

**Director Name:**

**Director Address:**

**For Committees of Incorporated Entities, please attach a list of all current committee members.**

**ACN / ABN:**  
 (where applicable)

OFFICE USE ONLY			
<input type="checkbox"/> Are all sections of the application completed and signed?		<input type="checkbox"/> Are all the supporting documents attached (see page 2)?	
Receipt Type: 783	Fee Paid:	Receipt No:	CSO:

## 2. PERSONAL APPEARANCE SERVICES (PAS) BUSINESS DETAILS

Trading Name:

Site Contact Name:

Site Address:

(for mobile premises, state where vehicle is stored)

Postal Address:

(if different to Applicant)

Site Telephone:

Site Contact Mobile:

Site Email:

Business Type:

Registration No of Vehicle/Vessel:

(applies to Mobile Premises Only)

## 2. PROPERTY OWNER/AGENT CONSENT

Contact Name:

Full Owner Name:

Telephone:

Mobile:

Email:

Signature of Owner or Agent:

## 3. SITE PLAN (Please advise details where applicable)

Provide site plans at a scale of 1:200 with the following information:-

- A legend of numbered fixtures, fittings, equipment, lighting, materials etc.
- Finishes for floors, walls, ceilings - e.g. tiles, stainless steel, painted plasterboard, etc.
- Location and identification of sinks - e.g. hand washing, cleaners sink, etc.
- Location of storage and waste areas - equipment, personal belongings, contaminated items, etc.
- Any other relevant information

## 4. CHECKLIST (Please tick where applicable)

Please ensure you submit the relevant documentation to support this application:

2 x Plans

Application fee

NB: To assist with the assessment of your application, you may also wish to attach other documentation that may be relevant.

## 5. DECLARATION (please use Additional Details for further applicant signatures where applicable)

I \_\_\_\_\_ declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

*NB: If the applicant is a Corporation, the signing applicant must state his/her position and have delegated authority to sign on behalf of the Corporation. If the applicant is a partnership, both partners must sign the form.*

Applicant Signature:

Date:

**Douglas Shire Council – Privacy Collection Notice:** Douglas Shire Council collects and manages personal information in the course of performing its activities, functions and duties. We respect the privacy of the personal information held by us. The way in which the council manages personal information is governed by *the Information Privacy Act 2009* (Qld). We are collecting your personal information in accordance with the *Local Government Act 2009* so that we can assess and finalise your application. Generally, we will not disclose your personal information outside of Council unless we are required to do so by law, or unless you have given us your consent to such disclosure. For further information about how we manage your personal information please see our Information Privacy Policy.

**6. ADDITIONAL DETAILS (if required)**

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**7. PRESCRIBED FEE (Applicable from 1 July 2023 to 30 June 2024)**

Processing of Plans	<b>\$ 317.00</b>
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