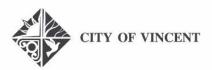
NOTICE OF CHANGE OF OWNERSHIP OF A LODGING HOUSE



Health (Miscellaneous Provisions) Act 1911 Health Local Law 2004 Schedule 3)

To: Chief Executive Officer
Attention: Health Services

APPLICANT DETAILS

I/We				
(full name of individual applicant/s or company name)				
of				
	ddress of applicant/s or company,)		
am/are the new owner/s of premises situ	, ,			
·				
	(address of lodging house)			
which is registered in the name of				
	(current trading name)			
and currently registered for	rooms lodgers			
I wish to change the trading name to	Tooms loagers			
wish to change the trading hame to	(complete only if you wish to ch	ange the register	ed trading name)	
		ange the registers	ed trading name;	
DESCRIPTION OF LODGING HO	OUSE			
Please complete details below if you are wishing t		om numbers and/or loc	lger capacities.	
Number of storey's			-	
Rooms for private use (not for lodgers)		Number	Floor area (m²)	
Laundries/toilets/bathroor	ms			
Bedrooms				
Dining room/s				
Kitchen/s				
Lounge room/s				
Other (Specify)				
Rooms for lodgers	r	Number	Floor area (m²)	
Bedrooms*				
Dining rooms*				
Kitchens*				
Lounge rooms*				
Other (Specify)				
*Refer to the Lodging House Guidelines on the Cu	itv's website for minimum floor areas requi	red as per the Health I	ocal Law 2004	

DESCRIPTION OF LODGING HOUSE (continued)			
Sanitary conveniences for lodgers*	Male	Female	
Toilets			
Urinals		N/A	
Baths			
Showers			
Hand wash basins			
*Refer to the <u>Lodging House Guidelines</u> on the City's website for minimum numbers required	as per the Health Loc	al Law 2004	
Kitchen facilities for lodgers*	Nι	ımber	
Ovens			
4 burner stoves			
*Refer to the Lodging House Guidelines on the City's website for minimum numbers required	l A as per the Health Loc	al Law 2004	
Laundry units for lodgers*	<i>,</i>	ımber	
Wash troughs			
Washing machines			
Dryers or clothesline (metres)			
*Refer to the <u>Lodging House Guidelines</u> on the City's website for minimum numbers required	l as per the Health Loc	al Law 2004	
Additional details			
(a) Lodger's meals will be provided by the \qed Manager (caretaker)	☐ Keeper (owne	er) 🗆 Lodger	rs
(b) The lodging house keeper (owner) \square will / \square will not re	eside continuously	on the premises	S
(c) Contact details of proposed manager (caretaker) if keeper (owner) re	sides elsewhere:		
	Ēmail:		
(d) There will be family members residing on the premises we	with the \Box Ma	nager 🗆 Kee	<u> </u>
(e) I request for lodgers to be able to store food in their rooms*	Yes □ No		
*Refer to the <u>Lodging House Guidelines</u> on the City's website for the requirements as per the	Health Local Law 200	4	
ATTACHMENTS			
ABN/ASIC registration			
Lodging house floor plan (if requesting change to room or lodger numbers	s) showing:		
 Lodger rooms and bed configurations including numbering of room 			
 House Guidelines on the City's website for room requirements as p Lodger and private dining room/s 	per the Health Loc	al Law 2004)	
 Lodger and private diffing room/s 			
Lodger and private kitchen/s			
 Lodger laundry facilities (wash troughs, dryers, clotheslines) 			
 Designated emergency exits 			
 Sanitary facilities (male, female and accessible toilets, urinals and h 	and basins)		
Smoking areas			
Outdoor areas for lodger use			
Lodging house management plan including complaint procedure and nois	e management		

DECLARATION & CONTACT DETAILS				
Name of applicant/s or company name				
Mobile	Email			
Signature/s of applicant/company director		Date		
Postal address (if different to premises address)				
Lodging house phone number				
Lodging house email address				

To submit your application please email this form to mail@vincent.wa.gov.au

FEES		
These fees are applicable for the 2023/2024 financial year. You will be sent an invoice for the relevant fees.		
Transfer of a lodging house registration fee	\$200.00	
Annual registration & assessment fee	\$313.00	