

PUBLIC HEALTH & WELLBEING ACT 2008
REQUEST FOR INSPECTION & REPORT

NAME OF PREMISES	
ADDRESS OF PREMISES	

I/We the undersigned, owners/proprietors of the above premises authorise you to provide:

(Interested Party)

Of _____ or solicitors acting on their behalf,
(Address)
 with a copy of any report or Certificate of Registration concerning the above premises

_____ Date ____/____/____
(Signature/s of Current Proprietor)

_____ Date ____/____/____
(Signature/s of Current Proprietor)

I _____
(Interested Party/Parties)

Of _____
(Address)

hereby request you to conduct an inspection of the above premises and provide me/us with a copy/copies of the report and any outstanding Orders under the Food Act 1984 or Public Health and Wellbeing Act 2008

Signature/s of interested party: _____ Date ____/____/____

Signature/s of interested party _____ Date ____/____/____

PROPOSED SETTLEMENT DATE	
COUNCIL FEE MUST ACCOMPANY THIS REQUEST	

OFFICE USE ONLY		
Fee Payable: 2019/20 Inspection & Report \$205.00 Or Urgent < 7 days \$360.00	Ledger No: 10508	Debtor Reference:
	Receipt No:	Date: ____/____/____