

# REQUEST FOR A PREMISES INSPECTION

Health Protection Unit  
274 Gower Street, Preston  
PO Box 91, Preston, Vic 3072  
T 8470 8658 F 9261 4880  
E health@darebin.vic.gov.au  
darebin.vic.gov.au



## APPLICATION INFORMATION

This form is to be completed by person/s who are interested in purchasing a new or existing business and require the Health Protection Unit to conduct an inspection of the premises under the:

- Food Act 1984 and FSANZ Food Safety Standards or the
- Public Health and Wellbeing Act 2008 and Regulations 2009.

Please allow up to 10 days for your request to be actioned.

Any additional follow up inspections will incur a cost.

## APPLICANT DETAILS

First Name	Last Name	
First Name (if partnership)	Last Name	
Company Name (if applicable)	ABN	
Contact person for registered Company		
Postal Address		
Suburb	Postcode	
Business Hours Phone	Fax	Mobile
Email		

## BUSINESS DETAILS

Business Trading Name	
Address	
Suburb	Postcode
Proposed settlement date (if known)	

## SOLICITOR DETAILS

Company Name		
Contact person		
Postal Address		
Suburb	Postcode	
Business Hours Phone	Fax	Mobile
Email		

## CONSENT FROM CURRENT PROPRIETOR/S TO DISCLOSE INFORMATION

I/We being the current proprietor/s of the above mentioned premises hereby consent to the disclosure of any orders and/or deficiencies identified under the Food Act 1984 or Public Health and Wellbeing Act 1988 to the above mentioned applicant on the day of inspection.

First Name	Last Name
First Name (if partnership)	Last Name
Company Name (if applicable)	
Signature/s	Date
Position	

The signing officer must state his/her position of authority in the case of a corporate or unincorporated body of persons, (e.g. Company or Partnership).

## PRIVACY

The collection and handling of personal information is in accordance with Council's Privacy Policy which is displayed on Council's website and available for inspection at, or collection from, Council's Customer Service Centres.

## METHODS OF PAYMENT

### IN PERSON

To pay with cash, cheque, money order, credit card or EFTPOS present this completed form at a Customer Service Centre listed below:

- 274 Gower Street, Preston
- 32-38 Separation Street, Northcote
- 23 Edwardes Street, Reservoir

### MAIL

Mail your completed form with cheque or money order to:

City of Darebin  
PO Box 91  
PRESTON VIC 3072

Please do not send cash in the mail.

## FEES

### Office Use Only

Application: <b>LC Pre-Payment Allocation</b>	<b>Premises Inspection Fee</b>	<b>\$ 215.00</b>
Receipt No.	Date	



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