



RICHMOND VALLEY COUNCIL

RETAIL FOOD OUTLET APPLICATION

For Council Approval

NAME of PROPRIETOR: _____
POSTAL ADDRESS: _____

TRADING NAME: _____
TYPE OF BUSINESS: _____
NAFSIS REGISTRATION NUMBER: _____
IS THE BUSINESS NEW OR CHANGE OF O/SHIP: _____
PROPERTY ADDRESS: _____
LOT NO. / DP NO.: _____
LAND / BUILDING OWNER: _____
TELEPHONE NO: _____
SIGNATURE OF APPLICANT: _____
DATE: _____

OFFICE USE ONLY

Debtor No: _____ Receipt No: _____
Fee: _____ Date: _____
Parcel No. _____
Is the business new _____ or a change of ownership? _____
1. EHO/AO _____ Revenue _____

Inspector's Report:

Inspector's Signature _____ Date _____