

Mortuary Premises Registration

Public Health ACT 2010 and Local Government Act 1993

OFFICE USE ONLY

Reference No.

About this form

Use this form to register a mortuary business premises or to make changes to a registration for an existing mortuary business premises.

Proposal (choose One Only)

□ New Busi	ew Business				
Annlinent	detelle				
Applicant	detalls				
Title:	□ Mr	□ Mrs	□ Ms	□ Other	
First Name:			Family Name:		
Trading Nan	ne (if applicable):				
Company Na	ame (if applicable):				
ABN/ACN (it	f applicable):				
Mailing Add	ress:				
Suburb:			State:	Post Code:	
Email Addre	SS:				
Daytime Telephone No. (Home/Work): Mobile No:					
Property	Details				
Lot No(s):		Section:	DP/SP N	umber:	
Unit No:		Street No:	Street N	lame:	
Suburb:				Post Code:	

Business trading name premises details

Business/Trading Name:						
ABN/ACN:						
Company Contact Name:						
Mailing Address:						
Suburb:		State:	Post Code:			
Email Address:						
Daytime Telephone No. (Hor	ne/Work):	Mobile No:				
CM reference: 24/161744 Last update	:d: 06/06/2024			1/3		
Postal address	Bayside Customer Service Co	ustomer Service Centres		W www.bayside.nsw.gov.au		
PO Box 21, Rockdale NSW 2216	Rockdale Library, 444-446 Prince	s Highway, Rockdale	T 1300 581 29	9		
ABN 80 690 785 443	Eastgardens Library, Westfield Ea	astgardens, 152 Bunnerong Road, East	gardens			

Development Consent or Complying Development Certificate Details

Registration Fee for new Regulated premises or change of ownership details		\$69.00	RC 15050
Fees			Application Code
□ Development Consent:			
□ Development Application:			

Supporting Documentation

		Applicant Use			Office Use	
	Yes	No	Exempt	Yes	No	
1. Development or Consent Documentation						

Declaration

- I declare that the information given is true and correct.
- I understand that if incomplete, the application may be returned to me, delayed, rejected or more information may be requested within 21 days of lodgement.

How to lodge this application

You can lodge your completed application form and any required supporting documents:

In person

At any of Council's Customer Service Centres:

- Rockdale Customer Service Centre: 444-446 Princes Highway, Rockdale NSW 2216
- Eastgardens Customer Service Centre: Westfield Eastgardens, 152 Bunnerong Road, Eastgardens NSW 2036

By mail

Post to Bayside Council: PO Box 21, Rockdale NSW 2216 with payment via cheque or money order (do not send cash)

By email

By email to council@bayside.nsw.gov.au.

Do not include credit or debit card details on your application. If lodged via email, a Council Customer Service Officer will phone to organise a secure over the phone payment using a credit card.

Payment is preferred by cheque, money order, debit or credit cards (Visa and Mastercard). Payments made using a credit card will incur a service fee of 0.5%

Privacy notification

Completion of this document is voluntary - partially completed applications may result in refusal of the application. The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Act 1998 and may be available to the public under various legislation

OFFICE USE ONLY

Receipt No

Date

\$