

Mortuary Premises Registration

Public Health ACT 2010 and Local Government Act 1993

OFFICE USE ONLY					
Reference No.					
About this form Use this form to registe business premises.	r a mortuary busi	ness premises or to	make changes to	a registration for an existing mortua	ıry
Proposal (choose O	ne Only)				
□ New Business □		☐ Change of Tradir	ng Name □ Othe	er	
Applicant datails					
Applicant details Title:	□ Mr	□ Mrs	□ Ms	☐ Other	
First Name:			Family Name:		
Trading Name (if applic	cable):				
Company Name (if app	licable):				
ABN/ACN (if applicable	e):				
Mailing Address:					
Suburb:			State:	Post Code:	
Email Address:					
Daytime Telephone No	. (Home/Work):	ne/Work):			
Property Details					
		Section:	DP/SP N	lumbor	
Lot No(s): Unit No:		Street No:	Street N		
Suburb:		Sifeet No.	Sileeri	Post Code:	
Suburb.				Post Code.	
Business trading	-	es details			
Business/Trading Nam	e:				
ABN/ACN:					
Company Contact Nam	ne:				
Mailing Address:					
Suburb:			State:	Post Code:	
Email Address:					
Daytime Telephone No			Mobile No:		1/3
Postal address	-	stomer Service Centres		W www.bayside.nsw	
PO Box 21, Rockdale NSW 22 ABN 80 690 785 443	16 Rockdale Lib	rary, 444-446 Princes Highv Library, Westfield Eastgarde		T 1300 581 299	

Теlephone Interpreter Services: 131 450 Τηλεφωνικές Υπηρεσίες Διερμηνέων 電話傳譯服務處 Служба за преведување по телефон

Applicant's Signature

☐ Development Application:					
☐ Development Consent:					
	Application Code				
Fees					
Registration Fee for new Regulated premises or change of ownership details	\$72.00		RC 15050		
Supporting Documentation					
	Applicant Use		ant Use	Office Use	
	Yes	No	Exempt	Yes	No
Development or Consent Documentation					
Development or Consent Documentation Declaration					
· · · · · · · · · · · · · · · · · · ·					

Date

Development Consent or Complying Development Certificate Details

CM reference: 25/202841 | Last updated: 01/07/2025 2/3

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	\$

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