

## REGISTRATION OF A NEW SKIN PENETRATION OR HAIRDRESSING PREMISES

*The Public Health Act 2010 & The Public Health Regulation 2012*

### Premise Details:

☐ Skin Premises

☐ Hairdressing

Trading Name: \_\_\_\_\_ ABN/ACN: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Company Name / Proprietors (if not a company list all proprietors):  
\_\_\_\_\_

### Contact Details:

Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

### Procedures Undertaken:

☐ acupuncture

☐ tattooing

☐ beauty Treatments

☐ hair removal

☐ body, nose or ear piercing

☐ colonic lavage

☐ hairdressing

☐ blood cholesterol & glucose measurement

☐ other (Please provide details):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Trading Hours: \_\_\_\_\_

### Number of employees:

Full-time: \_\_\_\_\_ Part-time: \_\_\_\_\_ Casual: \_\_\_\_\_

### Property Owner

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Contact Number: \_\_\_\_\_

Proprietor Signature/s: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

### Inspection of premises:

Council will undertake regular inspections of your premise to verify compliance with current public health requirements. After carrying out an inspection, an invoice will be forwarded for payment, in accordance with Council's Fees and Charges.