

REGULATED SYSTEMS PREMISES REGISTRATION FORM

PROPERTY DETAILS

Lot No./Sec No. DP/SP No. Unit/Shop No.

Street No. Street name

Suburb Post code

Shopping centre/building name

.....
Location of the premises.
Please provide all details.

BUSINESS DETAILS

Business/trading name ABN/ACN Date business started

Company name Contact person/s

Postal address - business
Street No. Street name

Suburb Post code

Contact phone number Email address

Residential address - proprietor/director
Street No. Street name

Suburb Post code

Contact phone number Email address

.....
Please fill in all details.

TYPE OF REGULATED SYSTEM

(PERFORMED AS PART OF BUSINESS OPERATIONS)

Warm water Cooling tower Other (please specify)

Make Model

LOCATION OF SYSTEM

Ground level Roof Above ground (internal)

MECHANICAL CONTRACTOR DETAILS

Business/trading name ABN/ACN

Contact person/s Contact number

WATER TREATMENT COMPANY DETAILS

Business/trading name

ABN/ACN

Contact person/s

Contact number

DEVELOPMENT CONSENT

Has development consent been granted for the above use?

Yes

No

DA number:

Has a Construction Certificate (CC) been issued for the building work?

Yes

No

CC number:

PRIVACY

Any personal information submitted to Penrith City Council will be dealt with according to the *Privacy & Personal Information Protection Act (1998)*, *Government Information Public Access Act (2009)* and the *Local Government Act (1993)*.

APPLICATION DECLARATION

I declare the information provided in this application is accurate and correct.

Signature/s

Date

SUBMISSION

Please take or send this application form and attached information to Council

NEED HELP?

Call our Environmental Health team on **4732 8055**
8:30am - 4:00pm Monday to Friday or see penrithcity.nsw.gov.au

OFFICE USE ONLY

Date received

Responsible officer

Signature

SP No.

Property No.

DA No.

CC No.

SD account No.

Notes

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PENRITH NSW 2750

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PENRITH NSW 2751

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