



Application for Transfer Registration of Prescribed Accommodation business – Rooming House

What you need to do



Complete the form

Make sure all sections are complete and you have supplied all supporting documents



Submit application

Submit your application at any Port Phillip Town Hall or via email



Receive your invoice

Once your application is processed you will receive an invoice for payment

Read before starting

Renewals for the next calendar year will be sent out by email and mail.

This application forms a legal document and penalties exist for providing false or misleading information.

How to apply

Submit this form and required supporting documentation:

- ✉ healthservicesunit@portphillip.vic.gov.au
- ✉ Health Services
City of Port Phillip
Private Bag 3
St Kilda VIC 3182

Further information

☎ 03 9209 6292

🖱 portphillip.vic.gov.au/councilservices/business-in-portphillip/business-permits

1 Declaration

☐ The information provided in this application is true and complete to the best of my knowledge

☐ I am over 18 years at the time of completing this application

Privacy policy

This information is collected by the City of Port Phillip under the requirements of the Public Health & Wellbeing Act for enforcement and Public Health purposes. It may be provided to the Department of Health for the same purposes, and for statistical purposes related to the application of the Act. It will be treated in compliance with CoPP Information Privacy Policy and the Information Privacy Act.

All of the information collected related to a rooming house application will be provided to Consumer Affairs Victoria. It is a requirement under the Residential Tenancies Act 1997 for councils to enter information about the rooming houses they register into the State wide register of rooming houses. Some of this information, specifically the rooming house address, the name(s) of the owner of the rooming house business, the business owner(s) ABN/CAN and the council which registers the rooming house, will be available to the public. Should you wish to have your personal details suppressed from the public view of the register you can apply in writing to the Director of Consumer Affairs Victoria.

2 Current owner’s details

If the business is owned by an individual or partnership all owners must complete and sign.

If you registered as an individual or partnership

Owner 1

First name	Last name
<input type="text"/>	<input type="text"/>

Owner 2 (if applicable)

First name	Last name
<input type="text"/>	<input type="text"/>

If you are registered as a company

Company name
<input type="text"/>

Owners signature	Print name	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

Owners signature	Print name	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>

3 Proposed Business owner's details

If the business is owned by an individual or partnership all owners must complete and sign.

If you are registering as an individual or partnership

Owner 1

First name

Last name

Date of birth

Owner 2 (if applicable)

First name

Last name

Date of birth

If you are registering as a company

Company name

ACN

Authority (name and position of the person authorised to make application on behalf of the company; eg Director)

Owner's contact details

Postal address

Suburb

State

Postcode

Phone number

Mobile phone number

Email

3 Business details

Type of business

Rooming house

Trading name

ABN

Business address

Unit number

Number

Street name

Suburb

State

Postcode

Amenities

Max number of residents

Number of bedrooms

Number of beds

Number of showers

Number of basins

Number of toilets

4 Manager's details

Manager's name

Best number to contact you on

Email address

5 Signatures

Signature - Applicant 1

Signature - Applicant 2 (if applicable)

Print name

Print name

Date

Date

If the business is owned by a sole trader or partnership, the owner(s) must sign

If the business is owned by a company, the applicant on behalf of that body must sign