



GLENORCHY
CITY COUNCIL

Date received:

Application fee:

Receipt No:

Licence No:

PO Box 103
Glenorchy Tas 7010
Ph: (03) 6216 6800
gccmail@gcc.tas.gov.au

ABN: 197 5325 2493

Public Health Risk Activity Application (Operator)

Public Health Act 1997
Sections 105 & 110

PART 1: TYPE OF APPLICATION

(Please tick (✓) tick one box only)

I am applying for a Public Health Risk Activity operator Licence

PART 2: APPLICANT DETAILS

Title

Given Name/s

Family Name

Company Name (linked to ABN/ACN) (if applicable)

ABN / ACN (if applicable)

Date of Birth

Postal Address (for business correspondence)

Business Phone Number

Mobile Number

Email Address

PART 3: PUBLIC HEALTH RISK ACTIVITY PREMISES DETAILS

Trading Name/s (please list all businesses that you may operate from)

Location of Premises (please list all locations that you may operate from)

Hours of Operation

M	T	W	T	F	S	S
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Business Phone Number

Mobile Number

PART 4: ACTIVITY DETAILS

Public Health Risk Activities that you undertake as an operator. (Please tick (✓) tick all that apply)

Tattooing

Ear Piercing

Body Piercing

PART 5: TRAINING DETAILS

Have you completed HLTINF005 - Maintain infection prevention for skin penetration treatments or equivalent?

Yes

No (provide certificate of attainment within 6-months of licence issue date)

PART 6: APPLICANT DECLARATION

- I declare that the information provided on this form is accurate, complete, and correct.
- I acknowledge that this application is not valid, and assessment of the application will not commence until the application fee is paid in full.
- I acknowledge and agree that if an email address is provided on this application, I consent pursuant to Section 6 of the *Electronic Transaction Act 2000* to the Council using that email address as a method of contact and for the provision of information by the Council.
- I understand and agree that information about this application and the businesses' on-going operations will be shared with the Department of Health to assess this application and the businesses' compliance with the *Public Health Act 1997*.
- I understand that this is an application, and approval of this application is not guaranteed.

Applicant Name

Applicant Signature

Date

PART 7: PAYMENT

Payment by phone	Payment in person
Credit card payments can be made by calling (03) 6216 6800.	Payment can be made on person with Customer Service at the Civic Centre; 374 Main Road, Glenorchy. Business hours are: 8.30am – 5.00pm Monday to Friday.

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