# Cassowary Coast REGIONAL COUNCIL

# **CASSOWARY COAST REGIONAL COUNCIL**

PO Box 887, 70 Rankin Street INNISFAIL QLD 4860 Ph: 1300 763 903

Email: enquiries@cassowarycoast.qld.gov.au

### APPLICATION FOR BUSINESS SALE SEARCH AND/OR INSPECTION

To: Chief Executive Officer, Cassowary Coast Regional Council

**Application for:** Business Sale Search and/or Inspection

Section 1 - Applicant Details (please print)						
Full Name:						
Telephone:	Mobile:					
Facsimile:	Email:					
Address:						
Trading name (if applicable):						
Contact name for this application:						
Telephone:	Mobile:					
Signature of Applicant:		Date:				
Section 2 - Current Busi	<b>iness Operator Details</b> (pleas	se print)				
		ation (see attached form on page 3) from the n and Sale Search Report to the applicant.				
Current Business Name:						
Current Name of Business Owner ,	/ Proprietor:					
Position in Business:						

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Telephone:		Mobile:				
Facsimile:		Email:				
Address:				•••••		
Trading name (if	applicable):					
Company name (	(if applicable):					
Director's name (if applicable):						
Prescribed Fees 2024-2025 Pro Rata 6 months applicable from 1 April (ie. 50% for 1-6 months)						
			Half Yearly 1 Apr – 30		Annual Fees 1 Oct -30 Sept	
Request inspe	ection within 15 working days of re	equest lodgement	□ \$202.00		☐ \$404.00	
Urgent Health Search Report within 5 working days			☐ \$449.50		□ \$899.00	
Other – Environmental Health Officer (EHO) time per hour					☐ \$301.00 per hr	
Payment options						
You can pay via EFTPOS at the Customer Service Centres between 8:30am to 4:30pm Monday, Tuesday, Thursday & Friday; and 9:30am to 4:30pm on Wednesdays (excluding public holidays).						
By BPay  Please tick if you would like an invoice to be emailed so you can pay by BPay.						
OFFICE USE C	DNLY					
Fee:	Receipt No:	Date:		Officer N	lame:	
Information Privacy Statement: Your personal information has been collected for the purpose of assessing your Application for Approval. The collection of your information is authorised under the <i>Local Government Act 2009</i> . You are providing personal information which will be used for the purpose of delivering services and carrying out Council business. Your personal information is handled in accordance with the <i>Information Privacy Act 2009</i> and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given Council permission or the disclosure is required by law.						

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To: Chief Executive Officer, Cassowary Coast Regional Council

#### WRITTEN DECLARATION

I/We authorise the Cassowary Coast Regional Council to releapremises located at:	se the recent inspection report for ou
to the following named person/persons:	
Name (please print):	
Position in company:	
Signature:	Date:

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