

NOTICE OF CHANGE OF OWNERSHIP OF A LODGING HOUSE



CITY OF VINCENT

Health (Miscellaneous Provisions) Act 1911
Health Local Law 2004 Schedule 3)

To: Chief Executive Officer
Attention: Health Services

APPLICANT DETAILS

I/We _____
(full name of individual applicant/s or company name)

of _____
(address of applicant/s or company)

am/are the new owner/s of premises situated at _____
(address of lodging house)

which is registered in the name of _____
(current trading name)

and currently registered for _____ rooms _____ lodgers

I wish to change the trading name to _____
(complete only if you wish to change the registered trading name)

DESCRIPTION OF LODGING HOUSE

Please complete details below if you are wishing to change the approved lodging house room numbers and/or lodger capacities.

Number of storey's		
Rooms for private use (not for lodgers)	Number	Floor area (m ²)
Laundries/toilets/bathrooms		
Bedrooms		
Dining room/s		
Kitchen/s		
Lounge room/s		
Other (Specify) _____		
Rooms for lodgers	Number	Floor area (m ²)
Bedrooms*		
Dining rooms*		
Kitchens*		
Lounge rooms*		
Other (Specify) _____		

*Refer to the [Lodging House Guidelines](#) on the City's website for minimum floor areas required as per the Health Local Law 2004

DESCRIPTION OF LODGING HOUSE (continued)

Sanitary conveniences for lodgers*	Male	Female
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Toilets		
Urinals		N/A
Baths		
Showers		
Hand wash basins		

*Refer to the [Lodging House Guidelines](#) on the City's website for minimum numbers required as per the Health Local Law 2004

Kitchen facilities for lodgers*	Number
Ovens	
4 burner stoves	

*Refer to the [Lodging House Guidelines](#) on the City's website for minimum numbers required as per the Health Local Law 2004

Laundry units for lodgers*	Number
Wash troughs	
Washing machines	
Dryers or clothesline (metres)	

*Refer to the [Lodging House Guidelines](#) on the City's website for minimum numbers required as per the Health Local Law 2004

Additional details

(a) Lodger's meals will be provided by the Manager (caretaker) Keeper (owner) Lodgers

(b) The lodging house keeper (owner) will / will not reside continuously on the premises

(c) Contact details of proposed manager (caretaker) if keeper (owner) resides elsewhere:
 Name: _____ Mobile: _____ Email: _____

(d) There will be _____ family members residing on the premises with the Manager Keeper

(e) I request for lodgers to be able to store food in their rooms* Yes No

*Refer to the [Lodging House Guidelines](#) on the City's website for the requirements as per the Health Local Law 2004

ATTACHMENTS

ABN/ASIC registration	<input type="checkbox"/>
Lodging house floor plan (if requesting change to room or lodger numbers) showing: <ul style="list-style-type: none"> Lodger rooms and bed configurations including numbering of rooms in order (refer to the Lodging House Guidelines on the City's website for room requirements as per the Health Local Law 2004) Lodger and private dining room/s Lodger and private lounge room/s Lodger and private kitchen/s Lodger laundry facilities (wash troughs, dryers, clotheslines) Designated emergency exits Sanitary facilities (male, female and accessible toilets, urinals and hand basins) Smoking areas Outdoor areas for lodger use 	<input type="checkbox"/>
Lodging house management plan including complaint procedure and noise management	<input type="checkbox"/>

DECLARATION & CONTACT DETAILS

Name of applicant/s or company name		
Mobile	Email	
Signature/s of applicant/company director		Date

Postal address <i>(if different to premises address)</i>	
Lodging house phone number	
Lodging house email address	

To submit your application please email this form to mail@vincent.wa.gov.au

FEES	
These fees are applicable for the 2024/2025 financial year. You will be sent an invoice for the relevant fees.	
Transfer of a lodging house registration fee	\$206.00
Annual registration & assessment fee	\$322.00