



Public Health Unit
311 Glenferrie Road Malvern
PO Box 58
Malvern 3144
Phone: 03 8290 3393
www.stonnington.vic.gov.au

Property Enquiry Owner's Consent

Current proprietor details

Current proprietor name:

Current trading name:

Premises address:

Current proprietor email:

I, the proprietor of the premises named in *Part 2. Current Proprietor Details*, hereby consent to the disclosure of any information and documents in Council's possession or power relating to the above named premises whether the information or documents were obtained in connection with the administration of the *Food Act 1984, Public Health and Wellbeing Act 2008* or otherwise, to the person named in '*Part 1. Applicant Details*'.

Name of current proprietor

Signature of current proprietor

Note to Current Proprietor

- If premises owned in partnership, both parties must provide consent.
- If premises owned by a company, consent must be given by a director of the company.

Office use only

Acct: R2600.2210 Health Application Fee

EHO area:
EHO name: Registration
Number:

Receipt number:

Fee paid:

Consent obtained:

Report sent: