



CASSOWARY COAST REGIONAL COUNCIL ACCOMMODATION FORM 2

PO Box 887, 70 Rankin Street
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APPLICATION FOR A PRESCRIBED ACTIVITY – REGISTRATION TO OPERATE A SHARED FACILITY ACCOMMODATION

LOCAL GOVERNMENT ACT 2009
LOCAL LAW NO. 1 (ADMINISTRATION) 2011 -
SUBORDINATE LOCAL LAW NO. 1 (ADMINISTRATION) -
SCHEDULE 17 - OPERATION OF SHARED FACILITY ACCOMMODATION

To: Chief Executive Officer, Cassowary Coast Regional Council

I hereby apply for Registration of Rental Accommodation Premises with Shared Facilities within the Cassowary Coast Regional Council.

OFFICE USE ONLY

Step 1

Application Creation; Plus

Group (Local Law);

Category (LLShareAcc)

Application for:	NEW	<input type="checkbox"/>	RENEWAL	<input type="checkbox"/>
HOSTEL	<input type="checkbox"/>	FARM STAY	<input type="checkbox"/>	
GUEST HOUSE	<input type="checkbox"/>	BACKPACKER	<input type="checkbox"/>	

Section 1 - Applicant Details (please print)

Step 4
Associated Names

Full Name (Proprietor/s): _____

Company Name: (If applicable) _____

List Names of all Directors; _____

Address of Corporation's Registered Office: _____

Telephone: _____ Mobile: _____

Facsimile: _____ Email: _____

Section 2 - Business Details (please print)

Contact Name for this application: _____

Telephone: _____ Mobile: _____

Facsimile: _____ Email: _____

Trading Name: (If applicable) _____

Business Address: _____

Real Property Description: Lot No: _____ Registered Plan No _____

Step 2:
Description (Trading Name)

Step 3:
Primary property/land

Manager's Name in full: *(if different)*

Site Manager's Contact Name for this application: _____

Telephone: _____ Mobile: _____

Section 3 - Facilities

Step 5:
Application
Variables
(Facilities)

Maximum number of persons accommodated:	<input type="text"/>	Number of bathrooms:	<input type="text"/>
Number of single bedrooms:	<input type="text"/>	Number of toilets:	<input type="text"/>
Number of double bedrooms:	<input type="text"/>	Number of kitchens:	<input type="text"/>
Number of other bedrooms, (eg dorm)	<input type="text"/>	Number of dining rooms:	<input type="text"/>

Section 4 - Fee Schedule 2021 - 2022

Step 6:
Charges
(Fee Schedule)

BACKPACKERS; HOSTEL; GUEST HOUSE

- | | |
|---|----------|
| <input type="checkbox"/> Initial Application & Permit Fee | \$361.00 |
| <input type="checkbox"/> Permit Renewal Fee | \$273.50 |

ALL SECTIONS MUST BE COMPLETED FOR YOUR APPLICATION TO BE PROCESSED WITHOUT DELAY

Checklist:

- A copy of a recent Pest Control Report from a licensed pest control operator must be provided.
- A recent QFRS Fire Safety Inspection.

New premises – additional requirements:

- For New Hostels you MUST enclose a copy of the current floor plan of the premises with details of bed locations.
- For New Premises you MUST enclose copies of detailed drawings of the premises and facilities scale (1:100)
- For New Premises you MUST supply a copy of letter of approval to operate rental accommodation in writing from the owner of the land, if applicable.

I / We declare that the information provided by me in this application is true and correct and I consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.

Print Name.....

Signature of Applicant: Date:

Office Use	Cashier Initials	Fee Paid	Date	Receipt	Application Number

Cassowary Coast Regional Council – Information Privacy Statement:

The Cassowary Coast Regional Council respects your privacy. Your personal information has been collected for the purpose of assessing your application for registration of a Shared Facilities Accommodation Permit including New, Renewal, Restoration & Amendment. The collection of your information is authorised under the *Local Government Act 2009*. Your personal information will not be disclosed to any other person or agency unless you have given your permission or Council is required to do so by law. You may apply to access this information on the appropriate form obtainable from Council Website at any time.

PAYMENT OPTIONS



Payment By BPAY®

Contact your bank or financial institution to make this payment from your cheque, savings, debit or credit card or transaction account. For more information go to www.bpay.com.au. Please quote **Biller Code 112698** and the **Payment Reference Number (see invoice)**.

Paying In Person

Payments can be made in person to:

Cassowary Coast Regional Council - Tully Civic Centre
38-40 Bryant Street, Tully
Monday to Friday 8:30 am to 4:30 pm

Cassowary Coast Regional Council - Cardwell Office
2 Balliol Street, Cardwell
Monday to Friday 9:00 am to 4:00 pm (closed 1:00 pm to 2:00 pm each day)

Cassowary Coast Regional Council - Innisfail Office
70 Rankin Street, Innisfail
Monday to Friday 8:30 am to 4:30 pm

Cash, Cheque, Debit or Credit Cards (Mastercard and Visa accepted)



Payment By Mail

Detach the remittance advice found on the bottom of the first page and mail with your payment to:

Cassowary Coast Regional Council
PO Box 887
INNISFAIL QLD 4860

Cheque or Money Orders should be made payable to Cassowary Coast Regional Council and crossed 'Not Negotiable'. If a receipt is required then please tick 'Receipt Required' box within the Remittance Advice.

