

Health Licence Application for Amendment

Health (Registration of Premises) Regulations 1966

(Please print clearly)



Far North
District Council

The purpose of this form is to make an amendment to an existing health licence .

Enquiries to:
Far North District Council
Environmental Health Services
Email: ask.us@fndc.govt.nz
Phone: 0800 920 029

Licence Details

Licence Number		Type/Class	
Trading Name			
Detailed Description of Operation			
Licencee (Liable for Payment)			
Postal Address			
Contact Phone		Fax	
Mobile		Email	
Applicant Signature			Date

Premise Details

Owner			
Premises Address			
Valuation No.		Rates No.	

Previous Owner Details

Licence Number		Type/Class	
Trading Name			
Detailed Description of Operation			
Licencee			
Postal Address			

Please supply as much information as possible to assist us with making the correct changes. There is a fee payable for this request please refer to the Councils "Fees & Charges" on the FNDC website.

For Office Use Only:

Health Licence Number		Licence Type	
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Environmental Health Officer

Name		Date	
Signature			

Comply

Non Comply

Comments

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