



TRADE WASTE
Application for Registration of Premises
or Change of Ownership
 Health (Registration of Premises) Regulations 1966

Invercargill City Council
 Environmental Health Section
 Private Bag 90104
 INVERCARGILL
 Phone (03) 211 1777
 Email service@icc.govt.nz

Details of Applicant

Applicant's Full Name or Registered Company Name (enclose a copy of Certificate of Incorporation):

trading as _____

Hereby apply for the registration of premises situated at:

(street number and physical address or location of premises)

Postal Address for documents: _____

Daytime Contact Person: _____

Daytime contact telephone number: _____ Mobile: _____

Email: _____

Type of Premises – Please tick

- | | | |
|--------------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Trade Waste | <input type="checkbox"/> Sale Yard | <input type="checkbox"/> Refuse |
| <input type="checkbox"/> Wool/Dags | <input type="checkbox"/> Tannery | <input type="checkbox"/> Sewage waste |
| <input type="checkbox"/> Other _____ | | |

Change of Ownership Details

Previous Owner: _____

Date that the change of ownership occurs/has occurred: _____

Fees: \$40.00 (GST inclusive) - Change of Ownership

\$120.00 (GST inclusive) - Pre-Opening

Annual Fees:

Trade Waste: \$250.00 (GST inclusive)

Enclosed, please find fees payable totalling \$ _____

Applicant's Signature: _____ **Date:** _____

Office Use Only	
Approved by EHO _____	Licence No. _____
Comment: _____	

Signed: _____	Date: _____