

Shire of Coolgardie **Application for Registration of a Lodging House**

APPLICANT DETAILS NAME OF APPLICANT/S							
RESIDENTIAL ADDRESS							
DIJONE (LI)	DUONE (M)		MODILE				
PHONE (H)	PHONE (W)		MOBILE				
EMAIL ADDRESS	•						
LODGING HOUSE DETAI PREMISES NAME	LS						
PREMISES ADDRESS							
TO BE CLASSIFIED AS:							
☐ lodging house	short term hostel	recreational can	npsite		service	d apartmen	ts
AND FOR (name) THE LODGING HOUSE. LODGING HOUSE DESCR	PIDTION	TO BE ENTERED	NTO THE R	REGISTE	ER AS	THE KEEPE	ER OF
	AIP HON						
Rooms for Private Use						Number	Area
Laundries/toilets/bathrooms							
Bedrooms							
Dining Rooms							
Kitchens							
Sitting Rooms							
Other (please specify)							
Rooms for Lodgers						Number	Area
Bedrooms							
Dining Rooms							
Sitting Rooms							

Other (please specify)



LODGING HOUSE DESCRIPTION (continued)

Sanitary Conveniences for Male Lodgers		Number	Area
Toilets			
Urinals			
Baths			
Showers			
Hand Wash Basins			
Sanitary Conveniences for Female Lodgers		Number	Area
Toilets			
Baths			
Showers			
Handwash Basins			
Laundry Facilities		Number	Area
Wash Troughs			
Washing Machines			
Dryers or Clothes Lines			
Calculation of proposed Manager: (2) The Keeper (please circle) WILL / WILL NOT continuously reside occupation of proposed Manager: (3) There will be family members of the manager/keep (4) The maximum number of lodgers on the premises will not excee	er residing on the premises	ease provide	name and
IGNATURE	DATE		
OFFICE	USE ONLY		
TE RECEIVED RECEIVED BY			
DATE RECEIVED	RECEIVED BY		