



Application for Hotel or Motel Approval

Mackay Regional Council Local Law No. 1 (Administration) 2011;
Mackay Regional Council Local Law No. 7 (Rental Accommodation other than Shared Facility Accommodation) 2011;
Subordinate Local Law No. 7 (Rental Accommodation other than Shared Facility Accommodation) 2011;
Subordinate Local Law No. 1.17 (Rental Accommodation other than Excluded Accommodation) 2011.

Privacy Notice: Mackay Regional Council is collecting this information in order to process your Application. Please be advised that Council under Legislation may be required to provide your details to a relevant State Department/Agency when requested or to a collection agency that has been employed by Council for the recovery of unpaid fees. In all other circumstances, this information will only be disclosed to a third party with your written authorisation or as required by law.

P: 1300 622 529 | **E:** council@mackay.qld.gov.au | **F:** 07 4944 2400 | PO Box 41 Mackay QLD 4740 | **ABN:** 56 240 712 069
CS Centres: Mon-Fri, 8:30am-4:30pm | Civic Precinct, Gordon St, Mackay | 65 Broad St, Sarina | 20 Victoria St, Mirani

For your application to be assessed you must:

- Complete all relevant sections;
- Provide all supporting information referred to on this form; and
- Submit with the relevant fee.

Contact council if you have any specific enquiries regarding fees or how to complete this form. Please type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

SECTION A – APPLICATION TYPE

NEW APPLICATION

Complete **SECTIONS B, C, E, F and H** and provide supporting information.

AMENDMENT (*change to operation*)

Complete **SECTIONS B, C, E, F and H** and provide supporting information.

TRANSFER

Complete **SECTIONS B, C, D, E, F and H**.

SECTION B – APPLICANT DETAILS

Title: Mr Mrs Ms Miss Other:

Family Name:

Given Name/s:

Postal Address:

Suburb:

Post Code:

Home Phone:

Mobile:

Email:

SECTION C – BUSINESS DETAILS

Trading Name:

ABN:

Trading Address:

Suburb:

Post Code:

Real Property Description (Lot/Plan):

Business Phone:

Business Fax:

Postal address where you can receive legal documents.

Postal Address:

Suburb:

Post Code:

Contact person for business if not the applicant and/or if the applicant is a company.

Contact Person:

Position:

Contact Phone:

Email:

SECTION D – TRANSFER OF APPROVAL

Current approval holder's full name and signature is required if transferring approval.

- I consent to the transfer of this hotel/motel approval _____ to the applicant in this application.

Current Approval Holder:

Signature:

Date:

SECTION E – OPERATION DETAILS

Please complete number of rooms, where applicable.

Hotel:

Motel:

SECTION F – OWNER CONSENT

If the applicant is not the owner of the location where the temporary event is to take place, the owner's name and signature is required.

Owner Name:

Signature:

Date:

SECTION G – ATTACHMENTS

Please provide:

1. A plan of the proposed Hotel or Motel (please tick) drawn to scale showing:
 - Layout and identification of all rooms to be used as part of the approval.
2. Evidence that approvals have been obtained for each of - Town Planning, Building, Plumbing and Trade Waste, as required. If you believe that any one, or all, of these approvals are not required to support this application, you must provide written evidence in support of your claim;
3. Certificate of compliance issued under the *Fire and Rescue Service Act 1990*;
4. If the operation of this approval incorporates the provision of a swimming pool for the use of guests, you are also required to make an application to operate a public swimming pool;
5. If the operation of this approval incorporates the preparation of food for sale, a food business licence is also required.

SECTION H – APPLICANT DECLARATION

- I declare the information provided in this application to be true and correct.

Applicant Name:

Signature:

Date:

PAYMENT OPTIONS

For a complete list of fees and charges, please refer to council's [Fees and Charges](#).

CREDIT CARD | We accept Visa or MasterCard. We do not accept American Express.

CHEQUE | Make your cheques payable to Mackay Regional Council.

CASH OR EFTPOS | You can pay at any of Council's Customer Service Centres.

OFFICE USE ONLY

Reference number: LC/H&RS/PP

Date:

Amount:

File number:

Receipt number:

Cashier: