REGISTRATION OF A LODGING HOUSE

Health (Miscellaneous Provisions) Act 1911

Health Local Law 2012

The City of Karratha is committed to working towards a paperless environment and reducing our environmental footprint, therefore we encourage you to complete and submit your application electronically.

APPLICANT DETAILS	
Name of proprietor(s)/keeper:	
Email:	
Phone:	**Mobile:**
Postal address:	

LODGING HOUSE DETAILS			
Name of lodging house:			
Premises address:			
☐ **Lodging house**	☐ **Short term hostel**	☐ **Services apartments**	☐ **Transient workforce accommodation**
Will the keeper reside continuously on the premises: ☐ **Yes** ☐ **No**			
Name of keeper:			
Address of keeper:			
Number of family members residing at the property with the keeper/manager:			
Maximum number of lodgers excluding keeper/managers family members:			
Will food be provided to the lodgers: ☐ **Yes** ☐ **No**		**If so, who provides the meals:**	

DESCRIPTION OF LODGING HOUSE

Rooms – private use	(#)	Rooms – lodgers	(#)	Ablutions (#)			Laundry	(#)
				M	F	Uni		
Bedrooms:		**Bedrooms:**		**Toilets**			**Coppers**	
Single beds		**Single beds**					**Wash troughs**	
Single bunk beds/twin singles		**Single bunk beds/twin singles**		**Urinals**			**Wash machines**	
Double/queen/king beds		**Double/queen/king beds**					**Clothes dryers**	
Dining rooms		**Dining rooms**		_____ **metres**			**Clothes lines**	
Kitchens		**Kitchens**		**Baths**			**Other (specify)**	
Sitting rooms		**Sitting rooms**					**Levels**	(✓)
Laundry		**Laundry**		**Showers**			**Ground floor**	☐
Bathroom		**Bathroom**					**First floor**	☐
Toilet		**Toilet**		**Hand basins**			**Second floor**	☐
Other (specify)		**Other (specify)**					**Other (specify)**	☐

DECLARATION	
I/we declare that all details in this form are true and correct.	
Signature:	**Date:**