

Declaration of Closure or Sale of Registered Business

If you have closed or sold your food business or your hairdressing, beauty, tattooing, skin penetration, accommodation or aquatic facility business, please complete the form below and email this to: maroondah@maroondah.vic.gov.au

Please complete and submit this declaration requesting for your Food Act or Public Health and Wellbeing Act registration to be cancelled.

| Your Details *all required fields | |
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| Name of Proprietor/s* (Individual/s or company) | |
| Your Contact telephone Number* | |
| Your Email Address * | |
| Your Business Trading Name* | |
| Address of your Business* | |
| Date of Closure* | |
| OR | |
| Date of Purchase Settlement* | |
| I, (person described above) hereby declare that I will no longer be operating the above-mentioned business from (date) and acknowledge the Food Act/ Public Health and Wellbeing Act registration will be cancelled. | |

Signed:

Date: