

## **Approved form AF2002-240**

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Approved by the General Manager of the Health Protection Service  
on 6.12.2002 under the

**Public Health Act 1997, s137A**

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## **Public Health Act 1997—Form DW4**

(see s34)

Australian Capital Territory

## **Drinking Water Utility Activity Licence Variation Form**

(See attached Drinking Water Utility Activity Licence Variation Form)

# Health Protection Service

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## DRINKING WATER UTILITY ACTIVITY LICENCE VARIATION FORM

Section 34 *Public Health Act 1997*

Licence No:

File No:

Please complete this form, sign it and return it.

### Section 1 Conditions of Variation

- This application must be signed by the current licensee; and
- The original licence must be submitted with this variation application.

If these conditions cannot be met the new applicant must complete a new application form.

### Section 2 Type of Variation

Licencee  Section 3 Business Details  Section 4 Contact Details  Section 5  
Postal Details  Section 6

### Section 3 Licensee

You cannot vary the Licensee using this form. Please complete a new Application. This form is available from the Health Protection Service.

### Section 4 Business Details

#### 1 Trading Name

Name

#### 2 Premises Address

Shop No	Property Name		
Street No	Street		
Suburb	State	Postcode	

### Section 5 Contact Details

#### 3 Contact Details for the Licensee (for administrative purposes)

Contact Person for Licensee
Business - Manager

#### 4 Business Contact Details

Phone	Mobile	Fax
Email		

#### 5 Licensees' Contact Details – Same as Question 4

Phone	Mobile	Fax
Email		

### Section 6 Postal Details

#### 6 Business Postal Address - Same as Question 2

Suburb	State	Postcode

### Section 7 Declaration

I declare that all the information supplied on this form is true and correct and the necessary records and / or documentation exist to support this application.

Signature of Licensee \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_

### OFFICE USE ONLY

Variation approved Yes  No

Officer's Signature \_\_\_\_\_ Date \_\_\_\_\_