



# Blacktown City Council

Environmental Health Unit  
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DX 8117

*Privacy:*  
The personal information that you have provided in this Form is for council purposes only and will be viewed by Councillors and Council staff only.

## ITINERANT VENDOR REGISTRATION APPLICATION FORM

**VEHICLE TO BE REGISTERED:**

Trading name of business:.....

ABN/ACN.....

Vehicle registration number.....

**Business owner's details:**

Company name/sole trader's name.....

Address.....

Postcode:..... Phone: (Bus).....

Email:.....

**PLACE(S) OF TRADE:**

.....

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**APPLICANT'S AUTHORITY:**

I hereby apply for registration of the food premises describe in this application.

Signature of Applicant:.....Date:.....