

Tourist Accommodation Act 1984 (NI)

NOTIFICATION OF CHANGE IN OWNERSHIP OF TOURIST ACCOMMODATION

About this form

You must complete and lodge this form to notify and provide updated ownership information of a tourist accommodation house to an authorised Tourist Accommodation Officer

I/We		
Name in full		
	I	
Is / Are now the Owner(s) of	T	
Name of Tourist Accommodation		
Situated on		
Portion Number		
Rural address		
New owner's information:		
Postal address		
Contact phone number		
Email address		
NOTE: Where the owner is not a natural pers	I son, state the address of the registered office (in the case of a company) or a	ddress for service of
notices (in the case of a partnership or other voting procedures, management structure.	body) and provide detailed information in relation to company including dir	ectors, shareholders,
Accommodation details:		
New name of accommodation (if applicable)		
Manager(s)/Contact name (if applicable)		
Is the tourist accommodation currently	registered under the <i>Tourist Accommodation Act 1984</i> (NI)?	□ Yes □ No
Classification of accommodation	□ Self-Contained □ Guest House/Lodge □ Ho	
Total Number of registered units	a self-contained a duest flouse, bouge	ter
Maximum amount of guests intended	to be supplied with sleeping is	
	commodation unit/s, please ensure each unit is described in the atta	sched schedule
there are any changes to any or the ac	commodation annys, please ensure each anne is described in the atte	icrica scricadic
Have you reviewed the checklist (available with the prescribed requirements of the	able from the Tourism Officer) to ensure that these unit/s comply ne Tourist Accommodation Regulations	□ Yes □ No
Have you reviewed the Tourist Accomm	modation Act 1984 (NI) ?	□ Yes □ No
I agree that all information provided ab	nove is true and correct	
Signature of new Owner(s)	See is true and correct	
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LODGMENT DETAILS - You can lodge the In Person: Registry Office - New Misland		ercare@nirc.gov.nf
OFFICIAL USE ONLY		
Received by an authorised Tourist Accomm		
Name	Signature Date	Received
Privacy	akanad managad and administrative discounting a 1919 of the 1900	(Chla) and the
Australian Privacy Principles (APP) in force fr	stored, managed and administered in compliance with the <i>Privacy Act 1988</i> om time to time.	(Ciri) and the

Attached Schedule:

COMMON ROOMS FOR PUBLIC USE

ROOM NAME		ROOM USAGE (Description)
Example:	Laundry	As described – 5m2

COMMON ROOMS FOR STAFF USE ONLY

DESCRIPTION OF ROOM NAME (Description)					
Example:	Staff dining room				

DESCRIPTION OF EACH UNIT

Unit	Number of	Number of	Any Other	Bedroom	Bedroom	Max.	Max.
Number or	Lounges	Bathrooms	Rooms	Name/Number	Measurements	Number of	Number of
Name	G			& Type of Bed	in Square	Persons	Persons
				···	Metres	per	per
						Bedroom	Unit
E I .			Kitchen	1 King Zip	16.5m2	2	
Example:	1	2	Dining	2 Single	16.5m2	2	4
Cottage 1			Study				