



FAIRFIELD CITY LIFETIME BUSINESS AWARDS Nomination Form

BUSINESS DETAILS

Name of Business:		
ABN:		
Business Address:		
Suburb:	State:	Postcode:
Full Name(s) of Business Owner(s):		
Description of the Business:		
Year of Business Establishment:	No. of Employees:	
Previous Business Addresses: <i>(within Fairfield NSW Local Government Area)</i>		

APPLICANT DETAILS *(must be one of the registered owners of the nominated business)*

Full Name:		
Postal Address:		
Suburb:	State:	Postcode:
Phone:	Mobile:	
Email:		

TERMS AND CONDITIONS

Terms and Conditions as listed on Council's website:
www.fairfieldcity.nsw.gov.au/BusinessAwards

DOCUMENTS REQUIRED & CHECKLIST

Before sending your application, please ensure all fields have been entered correctly. Incomplete applications will not be processed.

Tick

- Copy of Business Registration Certificate is attached.
- Two photos that highlight the goods and/or services produced by the business are attached.
- All sections of the nomination form are completed.
- Declaration section is signed.
- Copy of the nomination form is retained for your records.

DECLARATION

The declaration must be signed for the nomination to be processed.

1. I understand that the submission of a nomination form does not guarantee a Fairfield City Lifetime Business Award and the decision is at the discretion of the judging panel.
2. By completing this form, I acknowledge that I have read and understood the Fairfield City Lifetime Business Awards' Terms and Conditions.
3. By submitting this form, I agree to adhere to the requirements as set out in the Fairfield City Lifetime Business Awards' Terms and Conditions.
4. I hereby certify that:
 - a) The information supplied in this nomination form is correct to the best of my knowledge. I also undertake to advise Fairfield City Council should there be any alterations or additions to the information supplied at the earliest possible date.
 - b) The nominated business does not have any outstanding orders, notices, legal matters, debts or complaint investigations with Fairfield City Council.
 - c) The nominated business must be able to provide copies of appropriate certifications as stated.
5. I consent to photographs supplied in this Nomination Form and any photographs taken of the business including its employees, being used by Fairfield City Council for promotional and educational purposes in Council's publications, marketing material and website.

Applicant's Signature: x

Applicant's Name:

Date: DD / MM / YYYY

COMPLETED APPLICATION

Completed Nomination Forms should be submitted with all appropriate documentation to:

Fairfield City Council
PO Box 21
FAIRFIELD NSW 1860

Or email: mail@fairfieldcity.nsw.gov.au