



**Victorian Pharmacy Authority**

ABN 77 875 845 822

Level 2, 15-31 Pelham St, Carlton Vic 3053

Tel: 03 9653 1700

Email: enquiries@pharmacy.vic.gov.au

**NOTIFICATION OF COMMENCEMENT OF A NEW PHARMACY BUSINESS  
& PAYMENT OF CORPORATE OWNER LICENCE FEE**

**NOTIFICATION OF COMMENCEMENT**

Name of owner ..... ACN No.....

Contact email .....

Business or trading name of the pharmacy.....

**Commenced the pharmacy business at: (if more than one pharmacy, please use a different form for each)**

**Street Address** .....

**Suburb**.....

**Postcode**.....

**Premises email**.....

on (insert date of commencement of new ownership):     /     /

**Name of the Pharmacist in charge of day to day operations of the pharmacy:**

**Name(s) of all other owners of the pharmacy business**

**Signed (Director):**.....

Signature:

Date:

**ANNUAL LICENCE FEE PAYMENT**

Pro-rata annual licence in accordance with the fee schedule for period **1 May 2020 to 30 April 2021**

Notification date	Pro-rata Licence fee
1 July to 30 September	\$645.00 (full fee)
1 October to 31 December	\$483.75
1 January to 31 March	\$322.50
1 April to 30 June	\$161.25

Please go to the Victorian Pharmacy Authority website [www.pharmacy.vic.gov.au](http://www.pharmacy.vic.gov.au) to pay the relevant fee under **“Forms/payments”**.

To lodge this notification of commencement form by email or post, print the receipt and attach it to this form.

**Note: This form will not be processed without the receipt of the payment.**

**Send to: VICTORIAN PHARMACY AUTHORITY**

**Level 2, 15-31 Pelham St, Carlton Vic 3053 or Email enquiries@pharmacy.vic.gov.au**