



APPLICATION FOR CERTIFICATE OF APPROVAL

Schedule 2, Form 2 (Reg. 5)

HEALTH (Miscellaneous Provisions) ACT 1911

HEALTH (PUBLIC BUILDING) REGULATIONS 1992

I, being the Owner/Agent/Occupier, hereby apply under Section 178 of the Health Act for a Certificate of Approval in respect of:

Premises Details

Name: _____

Address: _____

Nearest Cross Street: _____

Intended Use: _____

Alteration /construction/extension of which was completed on _____

in accordance with your approval granted on _____

- By ticking this box I confirm I understand that this form authorises the City of Perth to reproduce any documents associated with this application for internal purposes only

NOTE: The owner, occupier, manager, trustee or other person (agent) by whose authority such public building is intended to be altered, built, created or converted thereto may sign this notice.

Signed: _____

Owner/Agent Name: (please print) _____

Address: _____

Telephone: _____

Email: _____

Date: (dd/mm/yy) _____

This form is available in alternative languages and formats on request