

HEALTH (MISCELLANEOUS PROVISIONS) ACT 1911

HEALTH (PUBLIC BUILDING) REGULATIONS 1992

APPLICATION FOR VARIATION OF CERTIFICATE OF APPROVAL

I, being the Owner/Agent hereby apply for variation of a Certificate of Approval in respect of:

Premises Details:

Name of: _____

Location No: _____ Street: _____

Town/Suburb: _____

Nearest Cross Street: _____

Reason for this variation from the existing Certificate of Approval is: _____

In support of the application I tender the following details as required: _____

Signed: _____

Owner/Agent _____

Address: _____

Telephone: _____

Email: _____

Date: _____

CITY OF BELMONT

215 Wright Street Cloverdale 6105

(Locked Bag 379 Cloverdale 6985)

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