



Health Act 1911

Health (Public Building Regulations) 1992

Application for Variation of Certificate of Approval

I being the owner/agent hereby apply for a variation of certificate of approval in respect to:

Premises Details

Name of _____

Organisation (if applicable) _____

Location No. _____ Street _____

Town/Suburb _____

Nearest Cross Street _____

Intentions for use _____

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 _____

Lodging this form

- | | | | | | |
|---|-------|---|---|-----------|--|
|  | Email | Scan and email to
council@nedlands.wa.gov.au |  | Fax | Fax to
08 9273 3670 |
|  | Mail | Post to
City of Nedlands
PO Box 9
NEDLANDS WA 6909 |  | In person | Administration
71 Stirling Hwy
NEDLANDS WA
6009 |