

APPLICATION FOR CERTIFICATE OF APPROVAL FOR A PUBLIC BUILDING FORM 2

HEALTH (Miscellaneous Provisions) ACT 1911
HEALTH (PUBLIC BUILDINGS) REGULATIONS 1992



I, being the owner/agent, hereby apply for a Certificate of Approval in respect of:

PREMISES DETAILS

Name of public building: _____

Address: No. _____ Street: _____

Suburb: _____ State: _____ Post code: _____

Nearest intersection: _____

Construction/extension/alteration of which was completed on _____ in
accordance with your approval given on _____.

Owner/Agent Name: _____ Phone: _____

Address: _____

Email: _____

Signed: _____ Date: _____

Fee Information

Fees apply in accordance with the schedule of fees and charges on the City's [website](#).