

PUBLIC BUILDING FORM 2



CITY OF VINCENT

APPLICATION FOR CERTIFICATE OF APPROVAL

Health (Miscellaneous Provisions) Act 1911

Health (Public Buildings) Regulations 1992 Regulation 5

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

PREMISES DETAILS			
Name of			
Location no.		Street	
Town/suburb			
Nearest cross street			
Construction/extension/alteration of which was completed on			
in accordance with your approval given on			
Signed:			
Owner/agent:			
Address:			
Telephone:			
Fax:			
Email:			

To submit your application please email this form to mail@vincent.wa.gov.au