

Application for Certificate of Approval

Form 2 ENH-002



Health (Miscellaneous Provisions) Act 1911
Health (Public Buildings) Regulations 1992 (Reg. 5)

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

PREMISES DETAILS	
Name	
Location / Suburb	
Nearest cross street	
Intentions for use	
Construction/extension/alteration of which was completed on:	
In accordance with your approval given on:	
Signed	
Owner/agent	
Address	
Phone	
Email	
Date	

To submit your application please email this form with plans and supporting documents to Events@esperance.wa.gov.au.