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Donnybrook WA 6239



## HEALTH (PUBLIC BUILDINGS) REGULATIONS 1992

### APPLICATION FOR CERTIFICATE OF APPROVAL

TO: Shire of Donnybrook-Balingup

I being the owner / agent (*please circle*) hereby apply for a Certificate of Approval in respect of:

#### **PREMISE DETAILS:**

Name: \_\_\_\_\_

No.: \_\_\_\_\_ Street: \_\_\_\_\_

Suburb/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Construction / extension / alteration (*please circle*)

Of which was complete on: \_\_\_\_\_

In accordance with your approval given on: \_\_\_\_\_

#### **DETAILS OF OWNER / AGENT: (*please circle*)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Suburb/Town: \_\_\_\_\_ Postcode: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date