

**APPLICATION FOR VARIATION OF
CERTIFICATE OF APPROVAL**



**FORM 3 [REG.9] HEALTH ACT 1911
HEALTH (PUBLIC BUILDINGS)
REGULATIONS 1992**

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

PREMISES DETAILS

NAME OF.....
LOCATION NO. STREET
TOWN/SUBURB.....
NEAREST CROSS STREET.....

Reason for this variation from the existing certificate of approval is.....
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In support of the application I tender the following details as required.....
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SIGNED:
OWNER/AGENT:
ADDRESS:
TELEPHONE:
FAX: