



Form 4A

Health Act 1911 Health (Public Buildings) Regulations 1992

PO Box 54, Claremont, WA 6910

APPLICATION TO CONSTRUCT, EXTEND OR ALTER A PUBLIC BUILDING

I being the owner/agent hereby apply under section 176 of the Health Act to construct, alter or extend a public building.

PREMISES DETAILS:			
Name:			
Location Number:			
Street:			
Town/Suburb:			
Nearest Cross Street:			
Intention for Use:			
Any of the following may sign this notice: The owner, occupier, manager, trustee or other person by whose authority such Public Building is intended to be built, created or converted thereto.			
Signed:			
Owner:			
Address:			
Phone:	Phone (M):	Fax:	
Application is to be submitted with two sets of building plans in 1:100 or 1:200 FEES FINANCIAL YEAR 2019 -2020 Application to vary a public building \$82.00 (per hour of processing time) New Public building certificate 'low risk' \$205.00 New Public building certificate 'medium risk' \$410.00 New Public building certificate 'high risk' \$610.00			



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Office use only

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APPLICATION FOR CERTIFICATE OF APPROVAL

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

PREMISES DETAILS:				
Name:				
Location Number:				
Street:				
Town/Suburb:				
Nearest Cross Street:				
Intention for Use:				
Construction/extension/alteration of which was completed on:				
in accordance with your approval given on:				
Signed:				
Owner/Agent:				
Address:				
Phone:	Phone (M):	Fax:		

This application is to be submitted on completion of construction and after a final inspection has been undertaken by the Town of Claremont Environmental Health Officers to ensure that requirements have been met.





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CERTIFICATE OF ELECTRICAL COMPLIANCE			
	llation, alteration, addition- at the undermentioned premises has been carried of the Health (Public Buildings) Regulations 1992.		
CONTRACTOR'S DETAILS			
Business Name:	Registration Number:		
Address:			
Signature of Licensed Electrical Contracto	r:		
Telephone number:			
Date:			
PREMISES DETAILS:			
Name of Occupier:			
Details of Building:			
Business name:			
Location Number:			
Street:			
Town/Suburb:			
Particulars of Installation:			
Is there any electrical work for which you are not responsible in these premises?			
Details of works:			
Construction/extension/alteration of which	was completed on:		
In accordance with your approval given on	n:		
Property owner:			

Address: