

## **Application Form**

## FORM 3 – Variation of Certificate of Approval

For the purpose of applying in conjunction with the Health (Miscellaneous Provisions) Act 1911 & the Health (Public Buildings) Regulations 1992.

Applicant Details			
Name of applicant			
Phone number			
E-mail			
Postal Address			
	Suburb	Postcode	

Premises Details						
Premise name						
Premise address						
	Suburb		Postcode			
Postal address		·	·			
	Suburb		Postcode			
Nearest cross street		·	·			
Reason for this variation from the existing Certificate of Approval is						
In support of this application I tender the following details as required						

Declaration				
	I declare as the Applicant, all the information supplied on this form is true and correct.			
	I have submitted this form at least 14 working days prior to the event.			
Full name				
Signature		Date		

Note: fees and charges may apply

