



Application for Certificate of Approval (Form 2)

Health (Miscellaneous Provisions) Act 1911 – Health (Public Buildings) Regulations 1992

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

Premises Details	
Name of Premises: _____	
Address:	Street: _____
Suburb / Town: _____	Postcode: _____
Nearest Cross Street: _____	
Construction / extension / alteration of which was completed on: _____ (insert date)	
Note: these details are applicable when using existing public buildings only and not when using public open space or parks.	
in accordance with your approval given on: _____ (insert date)	
Name: _____	
Address: _____	
Email Address: _____	
Contact Number: _____	
Signature: _____	Date: _____

The City of Rockingham is collecting your personal information to process an application for event approval under the Health (Public Building) Regulations 1992. It may also be used for secondary purposes which would be reasonably expected.

We may share this information with other government agencies in order to assess the application. If you choose to not provide your personal information, we may not be able to process the application.

To access, correct or learn more about how we handle personal information please contact privacy@rockingham.wa.gov.au or visit rockingham.wa.gov.au/privacy.