## **APPLICATION**



(Unauthorised Buildings or Strata Title creation)

MANDURAH WA 6210	
T (08) 9550 3777   F (08) 9550 3888	
W www.mandurah.wa.gov.au	

Suburb/ postcode	Mo	b
Email address	Fa	ах
Signature/ Date	· · ·	
Site Access Contact details (if different to above	/e)	
Contact name	Pr	1
Position	Mot	)
Email address		
ATTACHED APPLICATION (where applicable)		
I have attached a completed <b>Application for</b> ) (circle as applicable <b>Building Approval Certificate(BA13)</b> / <b>Building Approval Certificate – Strata (BA15)</b> / <b>Occupancy Permit – Strata (BA11</b> ) Once the above Certificate of Building Compliance is issued, please City of Mandurah.		ne attached "Application", with the
Name Signature		Date
You should be aware that the regulated time period that the Cit for Approval/ Permit will not commence until such time that the Building Compliance.	ty of Mandurah is requ e City of Mandurah ha	ired to determine the application s issued the Certificate of
3 Peel Street   PO Box 210		
MANDURAH WA 6210 T (08) 9550 3777   F (08) 9550 3888 W www.mandurah.wa.gov.au E council@mandurah.wa.gov.au		MANDURAH

## **Property details** Street Number Lot Number Street Name Address Suburb Main use of building **Building classification**

Year of Construction

## Applicant details

Applicants name		
Address	Ph	
Suburb/ postcode	Mob	
Email address	Fax	
Signature/ Date		

## Site A

Contact name	Ph	
Position	Mob	
Email address		



OFFICE USE