

**Schedule 7**  
Shire of Esperance  
**Health Act 1911**  
**APPLICATION FOR LICENCE OF A MORGUE**

To: Chief Executive Officer  
Shire of Esperance

\_\_\_\_\_

(Full name in block letters)

of \_\_\_\_\_

(Residential Address)

apply to licence the premises listed below as a Morgue

Address of premises:.....

.....

Name of premises:.....

.....

Dated this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_

(Signature of Applicant)

**Schedule 8**  
Shire of Esperance  
**Health Act 1911**  
**CERTIFICATE OF LICENCE OF A MORGUE**

This is to certify that the following premises is licensed as a Morgue from the

\_\_\_\_\_ day of \_\_\_\_\_ until 30th Day of June \_\_\_\_\_.

Address of premises:.....

.....

Name of Premises:.....

.....

Dated this \_\_\_\_\_ day of \_\_\_\_\_

\_\_\_\_\_

Environmental Health Officer