Department of **Local Government, Industry Regulation and Safety**

GOVERNMENT OF WESTERN AUSTRALIA

Form 30

This form is effective from 1 July 2026

Application for prior approval of rule amendment(s)

Co-operatives Act 2009 s103

Please read this information before completing this form

About this form

This form is used to apply for prior approval under the *Co-operatives Act 2009* (the Act) for changes to be made to the following rules before a resolution amending the rules is passed by the Co-operative.

1. rules under section 103(1A) of the Co-operatives Act 2009 relating to the conversion of a non-distributing to distributing co-operative; and
2. rules under section 103(1B) of the Co-operatives Act 2009 relating to the active membership provisions as made by designated instrument published in the Western Australian Government Gazette on 19 May 2017.

Lodgement period
At least 21 days before notice of the resolution it to be given to members. If needed, you can apply for a longer timeframe using the Form 12 – Application for an extension or abridgement (shortening) of time.

How to complete this form

- You can complete this form onscreen and print it out or print and complete it by hand.
- If completing by hand use a blue or black pen and print using BLOCK letters.
- Complete all sections of the application and the contact details in all cases.
- Attachments are required as part of this application. Refer to the document checklist in section 4.

Fees

Please refer to our Co-operatives fees and forms webpage for the current fees. Fees are exempt from GST and subject to change without notice.

If you lodge this form by post or email, you will be emailed a Payment Number (PN) to make payment by credit card or Bpay via Consumer Protection's secure online payment portal.

Guides and related information

Section 177(3) of the Act requires that several notices are sent to all members with notice of the special resolution. The resolution is not validly passed unless the co-operative has complied with that requirement.

The proposed alterations do not take effect until they are passed by special resolution and have been registered with the Registrar pursuant to s106 of the Act. The approved amendments once passed an be registered using the Form 32 - Application to register rule amendments or special resolution.

How to lodge

You can lodge your completed form and supporting documents:

In person:	**By post:**	**By email:**
Customer Service Level 1, Mason Bird Building 303 Sevenoaks Street, CANNINGTON *Hours: 8:30 am to 4:30 pm (weekdays)*	Associations and Charities Department of Local Government, Industry Regulation and Safety Locked Bag 14 CLOISTERS SQUARE PERTH WA 6850	**cooperatives@lgirs.wa.gov.au**

What happens next

- The form and supporting documents will be reviewed. The contact person will be notified in writing if further information is required.
- If approved, you will be advised that arrangements for members to vote on the alterations by special resolution can be made, and once passed the changes must be registered using the Form 32 - Application to register rule amendments or special resolution. Otherwise, if refused, we will provide notification of the reasons why.
- If any information provided in the application changes, Consumer Protection must be notified as soon as possible.

Contact

Telephone	**1300 30 40 74 or (08) 6552 9300 (**8:30 am to 4:30 pm weekdays)
Email	**cooperatives@lgirs.wa.gov.au**
Website	**www.lgirs.wa.gov.au/co-ops**

The above information is intended as a guide only and is included to assist you in completing and lodging this form. This page is not part of the form. If required, professional advice should be obtained regarding the matters dealt with in this form.

Department of **Local Government, Industry Regulation and Safety**

GOVERNMENT OF WESTERN AUSTRALIA

Form 30 - Application for prior approval of rule amendments

Co-operatives Act 2009 s103

OFFICE USE ONLY

When completed, this form is classed as "OFFICIAL SENSITIVE"

1 – CO-OPERATIVE DETAILS

Co-operative registration number *(If you do not know the number check on our list of Registered Co-operatives webpage)*

Name of co-operative

2 – DETAILS OF RULE AMENDMENTS

How are the proposed amendments to be implemented? *(Tick one only)*

☐	By special resolution in a general meeting	▶ *date of general meeting*	
☐	By special resolution by postal vote	▶ *closing date for postal vote*	
☐	By special resolution by special postal vote	▶ *closing date for special postal vote*	
☐	Board resolution	▶ *date of resolution of board*	

Provide the full text of the proposed rule amendment(s), including the rules numbers and note any rule deletions. *(If there is not enough space, please attach extra pages to this form.)*

3 - DOCUMENT CHECKLIST

This form cannot be processed without the following documents. Mark the documents you are submitting.

☐ A copy of the **proposed alterations** to the co-operative rules.

☐ A copy of the proposed **notice of special resolution**

☐ A statement detailing the **reasons for the alteration**

FORM CONTINUES NEXT PAGE

4 – DECLARATION

I declare that:

- I am authorised to submit this application for the co-operative;
- All the information contained in this form is to the best of my knowledge, complete, true and correct and I have taken reasonable steps and made reasonable inquiries to confirm this; and
- I understand that providing false or misleading information or documents and failing to give information that renders the particulars contained in this form or the documents given with or in support of the application false or misleading is a criminal offence under the *Co-operatives Act 2009*.

Signature

Date signed

Full name of person signing this form

5 - PRIVACY COLLECTION NOTICE

The Department of Local Government, Industry Regulation and Safety (LGIRS) collects the personal information you provide through this form to administer the *Co-operatives Act 2009 (WA)*, including assessing applications, processing annual returns and notifications, and maintaining records to support regulatory functions. For more information about how your personal information is handled, including disclosures and your privacy rights, please see the full Privacy Collection Notice on our website.

FORM CONTINUES NEXT PAGE

THIS PAGE DOES NOT CONSTITUTE PART OF THE FORM AND WILL NOT BE PLACED ON THE REGISTER.

Who should we contact if there is a query about this form

Title

Given name

Family name

Daytime telephone number

Email

Address

Suburb

State

Postcode