



Form 99A

This form is effective from 1 July 2026

Co-operative document request form

Please read this information before completing this form

About this form

Use this form to access documents lodged with the Department relating to a co-operative registered under the *Co-operatives Act 2009* upon paying the relevant fee.

How to lodge and pay

The completed form should be emailed to cooperatives@lgirs.wa.gov.au. After Consumer Protection has received your form, you provided with a quotation for your order.

There is no obligation to proceed with the request and the documents sought may be altered during this time.

If you proceed with your request, you will receive an invoice with a Payment Number (PN) to make payment by credit card or Bpay via Consumer Protection's secure online payment portal.

Fees

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

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

Form 99A - Co-operative document request form

SECTION 1 – REQUEST DETAILS

Provide details of the co-operative that you require documents about:
If you require documents relating to more than one co-operative, please copy this page.

Registration number

C

Co-operative name

SECTION 2 – DOCUMENTS REQUIRED *(U = uncertified | C = certified copy)*

Select the documents that you require for the co-operative:

Extract

(includes name, registration status, date of registration/deregistration, type, primary activity, registered office, current directors and secretaries)

U **C** **Co-operatives rules**

Approximate lodgement date

U **C** **Annual return to the Registrar (Fm10)**

Year of return:

U **C** **Notification of changes to directors and officers (Fm13)**

Approximate lodgement date:

U **C** **Notification of changes to registered office (Fm14)**

Approximate lodgement date:

U **C** **Other document (please specify)**

SECTION 3 – APPLICANT

First name

Family name

Organisation name (if applicable)

Address

Suburb

State

Postcode

Contact number

Email