

Please print clearly in BLOCK LETTERS with a black pen and ensure all fields have been filled out correctly.
Please tick the appropriate boxes. Once your application is received a Council Officer will contact you if further information is required.

1 Applicant details

Applicant's name/s	(in full)			
Applicant address				
Applicant telephone	Phone			
	Mobile		Email	
Signature of Applicant			Date	

Indicate preferred method of receiving completed compliance certificate Post Email

2 Access for inspection

 Access to the swimming pool (external or internal pool) for inspection must be made available.

Access details			
Contact name		Phone	
I give permission to Council's Officer to enter the property for purpose of inspection of the swimming pool.			
Signature of owner(s)		Date	

3 Owners details

Registered Owner name			
Signature		Date signed	
Registered Owner name			
Signature		Date signed	
Telephone		Swimming Pool Registration No.	
Your pool must be registered in the NSW Swimming Pool Register (www.swimmingpoolregister.nsw.gov.au)			
Type of pool	(above ground/inground)	Single Dwelling Yes / No (Please circle answer)	
Location of pool			
House number		Street name	
Lot number		DP	
Suburb			
Date of construction (if known)			

OFFICE USE ONLY

Code: 761

Fee: \$150.00



Receipt No.

Rec Date

ABN: 26 987 935 332

TRIM: F12/453