



## APPLICATION FOR SWIMMING POOL CERTIFICATE OF COMPLIANCE

IN ACCORDANCE WITH SECTION 22B & 22C OF THE SWIMMING POOLS ACT 1992

I, \_\_\_\_\_ (Name)

Of \_\_\_\_\_ (Address)

Hereby make an application to Mid-Western Regional Council for a Certificate of Compliance pursuant to Section 22C of the Swimming Pools Act.

APPLICATION NUMBER	
RECEIPT NUMBER	DATE

### APPLICANTS DETAILS

Title	Given Names (s)	Surname
Postal Address		
Business Phone Number		Mobile Phone Number
Email Address		Fax Number

### OWNERS DETAILS - If same as Applicant please write "As Above"

Title	Given Names (s)	Surname
Postal Address		
Business Phone Number		Mobile Phone Number
Email Address		Fax Number

### PROPERTY DETAILS

Street Address		
Town/Locality		Post Code
Lot	Section	DP
Is an inspection required to enable the sale or lease of the above premises? YES <input type="checkbox"/> NO <input type="checkbox"/>		

Application Declaration – I declare that the information I have provided is true and correct.

Name (Please Print)	
Signature	Date

PLEASE NOTE: In accordance with the Swimming Pools Act 1992 the applicant is entitled to appeal to the Land and Environment Court against Council's refusal of the application. The Council's failure to determine the application within six (6) weeks after it is made is taken, for the purposes of any such appeal, to be a refusal of the application.

**SWIMMING POOL DETAILS**

Type of Pool (Please Circle)	In-ground fiberglass / In-ground Concrete / In-ground Spa / Above-ground / Above-ground Spa/Other
Age of Pool (Please Circle)	0-5 Years / 5-10 Years / 10 Years +
Site Plan	Please provide a site plan in the space below or attach one to this application showing the location of the swimming pool and all buildings, fences, gates, doors and windows which provide access to the pool.

**BUILDING SURVEYORS ASSESSMENT & RECOMMENDATIONS**

Building Surveyors Signature	Date