

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 ( <a href="http://www.swimmingpoolregister.nsw.gov.au">www.swimmingpoolregister.nsw.gov.au</a> )			
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

Valid until 30 June 2019



Receipt No.

Rec Date

ABN: 26 987 935 332

TRIM: F12/453