Administration Centre

86 Avoca Road, Wakeley Telephone: (02) 9725-0222 Mail: PO Box 21 Fairfield NSW 1860 Email: mail@fairfieldcity.nsw.gov.au

www.fairfieldcity.nsw.gov.au

APPLICATION FOR CERTIFICATE OF COMPLIANCE SWIMMING POOL BARRIER



Office use only

Section 22D Swimming Pools Act 1992

						SP Number :	1				
Proper	ty description										
		Lot:		Section:		DP / SP:					
Street:											
Suburb:											
Property details											
Proper	ty details										
i.	Is the property for sale:		☐ Yes ☐ No								
ii.	Is the property for rent / lease :		☐ Yes	□ No							
iii.	Is your property:		☐ Single dwelling ☐ Multi dwell			ing					
		☐ Childcar	e centre	Other							
Swimming pool details											
	31										
i.	Which of the following best describes when your pool was built ?										
	Prior to 1 September 2008										
	Between 1 September 2008 and 29 April 2013										
	After 29 April 2013										
ii.	Is your pool registered ?										
	Yes - Registration Number (if known)										
	No - Council can register your pool on the Statewide Register for a fee of \$10.00 payable with this application										
iii.	Application number										
	If known, please provide the Building / Development Application Number										
iv.	Type of swimming pool										
	☐ In-ground	☐ Semi in-gr	ound _	Above ground	☐ Spa /	hot tub					
V.	Has pool barrier be	en substantially	altered or re	built?							
v. Has pool barrier been substantially altered or rebuilt? To your knowledge, has the barrier surrounding the pool (including boundary fences, walls of buildings and pool fencing) been replaced or substantially altered ore rebuilt?											
	Yes - If so, when?										
	l No										

For access to the property, Council requires a contact person who can be contacted between 8.30am and 4.30pm. Monday to Friday. Please note that persons meeting Council officers on site or permitting access must be at least 18 years of age. Name (please print) Mobile Home/work Owners details and consent (the owner/s of the property must apply for this certificate) Title: ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other Given Name/s: Surname: Address: Postcode: Postcode: Contact details: Mobile: Home: Mobile: Home: Work: Fax: Work: Fax: E-mail: **Declaration** 1. I/we the owner/s of the above property apply to Fairfield City Council for a certificate of compliance for the swimming pool situated on the land. 2. I/we hereby give permission for Council Officers to enter the property for the purpose of inspecting the swimming pool and consent to the officer taking photographs of the pool area. 3. I/we declare that all the information given is true and correct. I/we also understand that if incomplete, the application may be delayed or rejected, and that additional information may be requested if required. 4. I/we do understand that information provided on this form and associated documents received, becomes open access information under the Government Information (Public Access) Act 2009. Name (please print) **Signature Date** Name (please print) Signature **Date** Notes: If the local authority fails to finally determine the application within 6 weeks after it is made, then the local authority is taken for the purposes of any appeal proceedings, to have refused the application, and If the local authority refuses the application for a certificate of compliance, or is taken to have refused the application, the owner of the premises on which the relevant swimming pool is situated is entitled to appeal to the Land and Environment Court against the local authority's refusal.

Please provide details of contact person available to arrange access to the property.

Site access

Fees

Please refer to Councils Pricing Policy and Fees and Charges as available on Councils website.

Fairfield City Council Use Only								
Receipting information :								
Swimming Pool Inspection Fee (Code 693)	\$150.00	Receipt No:	Date:					
Compliance Certificate Fee (Pensioner) (Code 695)	\$100.00	Receipt No:	Date:					
Re-Inspection Fee (Code 696)	\$100.00	Receipt No:	Date:					
Swimming Pool Registration Fee (Code 34)	\$10.00	Receipt No:	Date:					
Application processed by (Customer Service Officer)								