

BUILDING INSPECTOR (POOL SAFETY)

Technical Referee Report

This report must be completed by the referee, it accompanies the building inspector (pool safety) application.



To be a referee you should be a building surveyor, building inspector or building inspector (pool safety). You must have directly supervised the applicant carrying out the work listed in this reference.



Use this form to tell us about building inspector work that the applicant carried out under your supervision.



The VBA uses your referee report to help determine whether an applicant should be registered as a building inspector (pool safety). We may contact you to confirm the information you provide.

PART A

ABOUT YOU (THE TECHNICAL REFEREE)

Title	First	Middle	Surname	Date o	Date of birth	
					/ /	
If you a	are not a registered	building practitioner, we	ere you the applicant's: \Box	Site Supervisor	Construction Manage	
Your contact number			Your email address			
PAR1	ГВ					
EMPI	LOYER DETAI	ILS				
Name o	of company that em	ployed the applicant du	ring supervision period			
Traine c	or company that cm	proyect the applicant du	This supervision period			
ABN						
Address	S					
Street r	no. and name		Suburb	State	Postcode	
Employ	ver contact number		Employer email address			



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PARTC						
APPLICANT DETAILS (FOR WHOM YOU ARE	PROVIDING	THIS REPORT)				
First name	Surname					
PARTD						
EXPERIENCE						
SECTION 1						
Supervised inspection experience						
Please complete detail for the applicant's pool barrier inspection ex	operience that you	ı have supervised.				
Select the applicant's employment status at the time Period of supervision: From – To (mm/yyyy)						
	F	From To				
SECTION 2						
Applicant's pool barrier inspection work Use this section to provide further detail of the pool barrier inspection work that the applicant undertook, under your supervision. Include inspections of barriers for: Swimming pools, spas, relocatable pools, relocatable spas.						
1) Number of pool barrier inspections		Period of supervision: From – To (mm/yyyy) From To				
a) How many initial inspections of a pool barrier did the applicant participate in or assist with?	Turnoci					
b) How many re-inspections of a pool barrier did the applicant participate in or assist with?						
2) Types of pools and barriers inspected						
Type of pool (tick all that apply)						
\square Swimming pool \square Relocatable pool	☐ Spa	\square Relocatable spa				
Type of barrier components inspected under supervision (tick all that apply)						
☐ Fence height ☐ Height of gap under	fence	\square Construction material and type				
\square Impact load and load rating \square Non-climbable zone		\square Gates, hinges and latch mechanism				
☐ Minimum height of windows from ground, if a building forms part of the barrier						
☐ Other, please list:						



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	f pools and barrier	s inspected <i>conti</i>	nued
Type of barrier	(tick all that apply)		
☐ Glass	☐ Metal	☐ Perforated mesh	Building forms part of the barrier
☐ Timber	☐ Brick/Masonry	☐ Boundary fence	☐ Other, please list:
PART E			
REFEREE [DECLARATION		
of the B	·	e or misleading information	t. It is an offence under section 246 n in relation to an application for O penalty units.
To see how the	VBA uses and discloses your	personal information click	here to view the full VBA Privacy Policy.
☐ I declare th	at the information containe	d in this form is true and c	orrect to the best of my knowledge.
	nd that the VBA may make en In to be shared with any othe	'	nation I have provided, and I consent for this ose.
Referee name (please print)		
Referee signatu	re:	Date of s	ignature:

