FORM 23

Regulations 147Y(4), 147ZB(2)

**Building Act 1993**

Building Regulations 2018

certificate of pool and spa barrier compliance

**Issued to:**

1. Name of owner of the land (the ***property***) on which the swimming pool or spa is located:

2. Postal address:

3. Telephone number:

4. Email address:

**Property details:**

Number Street/road City/suburb/town Postcode

Lot/s LP/PS Volume Folio

Crown allotment Section Parish County

Municipal district

**Type of swimming pool or spa:** [*please tick*]

Permanent swimming pool 🞎

Permanent spa 🞎

Relocatable swimming pool 🞎

Relocatable spa 🞎

5. Date of construction of the swimming pool or spa:

6. Applicable barrier standard:

7. The applicable barrier standard applies under: [*please tick*]

* Division 2 of Part 9A of the Building Regulations 2018 🞎
* relevant deemed to satisfy provisions of the BCA 🞎
* a performance solution in accordance with the BCA 🞎

8. Date(s) of inspection(s) of the swimming pool or spa barrier:

**Certification of compliance**

Following inspection of the \*swimming pool barrier/\*spa barrier on the date(s) referred to in item 8 of this certificate, I certify that the barrier complies with the applicable barrier standard.

Signature of \*relevant building surveyor/\*swimming pool and spa inspector/\*municipal building surveyor:

Date:

9. I confirm that I \*did/\*did not carry out building work on the barrier to address identified non-compliance of the barrier prior to certifying the barrier's compliance with the applicable barrier standard.

**Inspector details**

10. Name of registered building practitioner:

11. \*ACN/\*ARBN

12. Address:

13. Email:

14. Building practitioner registration no.:

15. \*Municipal district/\*council name:

*\* Delete if inapplicable*