FORM 24

Regulation 147ZI(1)

**Building Act 1993**

Building Regulations 2018

Certificate of pool and spa barrier non‑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 non-compliance**

Following inspection of the \*swimming pool/\*spa barrier on the date(s) referred to in item 8 of this certificate, I certify that the barrier does not comply with the applicable barrier standard.

This certificate of pool and spa barrier non-compliance has been issued because:

|  |  |
| --- | --- |
|  in my opinion the barrier cannot or will not be made compliant with the applicable barrier standard within 60 days; or | 🞎 |
|  a written notice was provided to the owner in accordance with regulation 147ZG(1) or 147ZH(1) of the Building Regulations 2018 and the barrier was not made compliant within the time period specified in that notice; or | 🞎 |
|  in my opinion the barrier non-compliance poses a significant and immediate risk to life or safety; or | 🞎 |
|  in my opinion the barrier is non-compliant with the applicable barrier standard in one or more ways specified in regulation 147ZF(c) of the Building Regulations 2018. | 🞎 |

**List of non-compliant items (required):**

| *Column 1**Item number* | *Column 2**Items/components of swimming pool or spa barrier that are non-compliant with the applicable barrier standard* *[insert ways in which barrier is non‑compliant with the applicable barrier standard]*  | *Column 3* *Rectification work required**[set out the building work required to make the barrier compliant with the applicable barrier standard]*  |
| --- | --- | --- |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |

[*More rows may be added as required*]

Any additional comments:

Signature of swimming pool and spa inspector:

Date:

**Inspector details:**

9. Name of swimming pool and spa inspector:

10. \*ACN/\*ARBN

11. Address:

12. Email:

13. Building practitioner registration no.:

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

*\* Delete if inapplicable*