| Application Number |
|--------------------|
| Date Received |
| Receipt # |



Application for Barrier Fence Exemption

Certificate issued under Section 22 of the Swimming Pools Act 1992

All swimming pools and spas in New South Wales must be registered. Register your swimming pool with the NSW Government at <u>www.swimmingpoolregister.nsw.gov.au</u> or contact Council's Customer Service Centre for information. Fees apply to this application. Refer to Council's website for details about applicable Fees & Charges, or contact the Customer Service Centre.

1. PROPERTY DETAILS & SWIMMING POOL/SPA DETAILS

| Unit/Street No. | Street Name | | | | Suburb | | |
|---|--------------|-------------------------------------|-----------------|---------|------------|--------|--|
| | | | | | | | |
| Lot No. | Section | | | | DP / SP No |). | |
| | | | | | | | |
| Type of Pool | Above Ground | | Spa / Hot Tub / | ′ Hydro | | Indoor | |
| NSW Swimming Pool Register Certificate No. | | On-site location / Description of p | | | ool | | |
| | | | | | | | |
| | | | | | | | |

2. **APPLICANT DETAILS** - Certificate will be forwarded to the email address. If email is not provided, it will be posted

| Full Name | |
|---|---------------------|
| Company Name | Position in Company |
| Address Details | |
| | |
| Telephone (Mobile) | Business Private |
| Postal Address (if different from above) | |
| Email Address | |

3. DETAILS FOR ACCESS FOR INSPECTION – Access for internal inspection must be made available

| Cont Nam | Phone No | | | | | |
|--------------|--|--|--|--|--|--|
| Emai Addr | | | | | | |
| Acce Deta | | | | | | |
| 4. | EXEMPTION REQUESTED - clearly stating which requirement is desired to be exempt (Attach a separate sheet if there is insufficient space here) | | | | | |
| | | | | | | |
| 5. | REASONS TO SUPPORT REQUEST – demonstrate that it is impracticable or unreasonable (as limited by Section 22 of the Swimming Pools Act) for the swimming pool to comply with that requirement (Attach a separate sheet if there is insufficient space here) | | | | | |
| | | | | | | |
| 6. | PROPOSED ALTERNATIVE SAFETY MEASURES - alternative provision/s must be no less effective than the requirements (as limited by Section 22 of the Swimming Pools Act) and exist for restricting access to the swimming pool (If alternative safety measures are proposed, clearly describe the measures and provide a diagram to support the description) (Attach a separate sheet if there is insufficient space here) | | | | | |
| | | | | | | |

7. PRIVACY & PERSONAL INFORMATION

Information on this form is collected by Council for administrative and assessment purposes. It will be used by Council staff for the purpose of processing your application. This application form and any supporting documents you provide may be made available for public access under the *Government Information (Public Access) Act 2009.*

8. **RIGHT OF APPEAL**

- Under the provisions of Section 26 of the Swimming Pools Act 1992, the applicant is entitled to appeal to the Land and Environment Court against the local authority's decision within twenty eight (28) days of refusal of the application, and
- The local authority's failure to determine the application within 6 weeks after it is made, is taken, for the purpose of any such appeal, to be a refusal of the application.

| | OWNER DETAILS - All registered owner/s must sign (Certificate will be issued to the owner/s) | | | | |
|-----------------------------|---|--|--|--|--|
| Name of Registered Owner | | | | | |
| Signature | Date Signed | | | | |
| Name of Registered Owner | | | | | |
| Signature | Date Signed | | | | |

10. APPLICANT'S DECLARATION

I the undersigned, declare that the details provided to Central Coast Council are, to the best of my knowledge, true and correct.

| Signature | Date | / | / | |
|-----------|------|---|---|--|
| | | | | |