

| | | | |
|---|-------------|--|--|
| Licence No. | | Date: | |
| Debtor No. | Receipt No. | New/Renewal Compliance Certificate: \$150.00 | |
| Purpose of Application: <input type="checkbox"/> Lease <input type="checkbox"/> Sale <input type="checkbox"/> Other | | | |

DESCRIPTION OF POOL:

| | | | |
|-----------------------------------|--|-------------------------------|---------------------------------|
| <input type="checkbox"/> Inground | <input type="checkbox"/> Above ground: | <input type="checkbox"/> Spa: | <input type="checkbox"/> Other: |
| Other: | | | |

PROPERTY DETAILS OF WHERE SWIMMING POOL LOCATED:

| | |
|-----------------|---------------|
| Unit No: | House Number: |
| Street address: | |
| Suburb: | Postcode: |
| Lot: | DP/SP: |

APPLICANT'S (LICENSEE) DETAILS:

| | | |
|--|-----------|-----|
| Company Name: | | |
| Contact Name: | | |
| Street address: | | |
| Suburb: | Postcode: | |
| Telephone Number (H) | (W) | (M) |
| Email: | | |
| Please tick: <input type="checkbox"/> Managing Agent <input type="checkbox"/> Solicitor <input type="checkbox"/> Owner | | |

OWNER'S CONSENT:

Note: Signed consent is not required if the applicant is the owner, the managing agent or solicitor acting on owner's behalf. As the owner/s of the land to which this application relates, I/we consent to this application being made to The Hills Shire Council ("the Council"), as local authority for the Hills Shire Local Government area. I/we consent to authorised officers of the Council to enter the land to which this application relates and carry out inspections, to include, when and if necessary, the taking of photographs in accordance with the Service Agreement detailed on page 2 of this application form. By consenting to this application I/we accept the terms of the Service Agreement.

| | |
|---------|--------------------|
| Signed: | Date: |
| | Please print name: |
| Signed: | Date: |
| | Please print name: |

ACCESS FOR INSPECTION:

| | |
|-------|---------------------|
| Name: | Contact for access: |
|-------|---------------------|

LODGEMENT DETAILS:

You can lodge this completed form by:

MAIL: The Hills Shire Council
PO Box 7064
BAULKHAM HILLS BC 2153

IN PERSON AT COUNCIL'S CUSTOMER SERVICE CENTRES:

- Council's Administration Building, 3 Columbia Court, Baulkham Hills 2153
- Castle Hill Library, Cnr Castle and pennant Streets, Castle Hill
- Dural Library, Pellitt Lane Dural
- Vinegar Hill Memorial Library, 29 Main Street Rouse Hill Town Centre

SERVICE AGREEMENT:

Authorised Officers appointed by The Hills Shire Council ("the Council"), will on behalf of the Council undertake swimming pool compliance inspections in a professional manner and in accordance with the requirements of the Swimming Pools Act 1992. Authorised Officers will identify and outline all work that is necessary, if any, in order for you to comply with the requirements of the Swimming Pools Act 1992 and to ensure the timely determination of the application.

Fees and Charges

The fees and charges imposed are as prescribed by Section 19 of the Swimming Pools Regulation 2018:

New/Renewal Compliance Certificate: \$150

Further Inspection Fee: \$100 each inspection

Only the lodgement fee is payable on lodgement of the application. If a reinspection is required this will be invoiced to the applicant at time of inspection. Reinspection fees will be imposed for each subsequent inspection carried out.

Please note: Council will not issue a Certificate of Compliance until all fees, including a reinspection fee if imposed, have been paid.

The Swimming Pools Act 1992, the Swimming Pools Regulation 2018 and AS 1926.1 - 2012 Australian Standard Swimming Pool Safety Part 1: Safety Barriers For Swimming Pools apply to all swimming pools (both indoor and outdoor) on a premises where there is a residential building, a movable dwelling (eg caravan) a hotel or a motel. If you are the owner of premises on which a swimming pool is situated you must ensure the following in relation to your pool:

- The pool is surrounded by a child resistant barrier
- Ensure the barrier, gates are in a good working condition, the gate opens away from the pool and has a self closing mechanism device at a height of 1.5 metres above the finished ground level
- Gates that provide access to the pool area are to be kept securely closed at all times when not in use.
- Display prominently an approved resuscitation sign in the immediate vicinity of the swimming pool /spa
- Maintain the 900mm non climbable zone areas around the swimming pool
- Spa pool is required to be covered or secured by a child safe structure

NOTES

1. A certificate of compliance issued under section 22D and remains valid for a period of 3 years from the date on which it is issued.
2. A certificate of compliance ceases to be valid if a Direction is issued under section 23 of the Swimming Pools Act 1992 in respect of the swimming pool to which the certificate relates.
3. Commencing 29 April 2016, a Compliance Certificate is required before selling or leasing a property with a pool.
4. Personal information provided on this form will be used by Council officers will only be used in connection with the requirements of this legislation.

For further information about pool safety and for checklists to self-assess your swimming pool safety barrier please visit Council's website www.thehills.nsw.gov.au/swimmingpools



Credit Card Payment

Financial Year 2021/22

PLEASE NOTE: If you are using this form for payment of a Development Application Submission **DO NOT** upload it to the planning portal as your information is not secure. Instead please email your completed form to cscbo@thehills.nsw.gov.au

TO BE COMPLETED IF PAYING BY CREDIT CARD:

Payments are accepted for Visa or MasterCard.

PLEASE TICK PREFERRED OPTION:

Option A – (to be completed if you are submitting credit card details with your application) Council will not store your credit card details.

Reason for payment (please tick) Application Other (please specify)

Cardholder Name

Credit Card Type: Mastercard Visa

Credit Card number

Expiry Date CCV Amount \$

DETAILS FOR MAILING OF RECEIPT

Name

Address

Suburb Postcode

Email

Option B – (to be completed if you require a Council Officer to contact you for payments details)

Name of Person to contact

Name of Company: (if applicable)

Phone

OFFICE USE:

| Date | Time | Officer | Details |
|------|------|---------|---------|
| | | | |
| | | | |
| | | | |
| | | | |

CONDITIONS OF USE: If you have selected option "B" four (4) attempts will be made to contact you regarding your payment details, if after four attempts we are unsuccessful, your application/request will be returned.

PRIVACY NOTIFICATION: The personal information that Council has collected from you is personal information for the purposes of the Personal Information Protection Act (PIIPA) 1998. The intended recipients of the personal information are Officers within the Council data service providers engaged by the Council from time to time, any other agent/contractor of the Council and other statutory authorities. The supply of the information by you is not voluntary. Council has collected the information from you in order to process your request. You may make application for access or amendment to information held by Council. You may also make a request that Council suppresses your personal information from a public register. Council will consider any such application in accordance with the PIIPA. Council is to be regarded as the agency that holds the information. If you have any further enquiries concerning this matter, contact Council's Senior Coordinator Governance Services on (02) 9843 0555. General information about the GIPA Act is available by calling the Office of the Information Commissioner on 1800 194 210 (free call) or at its website www.oic.nsw.gov.au.

