

<h2 style="margin: 0;">APPLICATION FOR THE ISSUE OF A POOL SAFETY CERTIFICATE</h2> <p style="margin: 0; font-size: small;">Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.</p>			
TYPE OF POOL	<input type="checkbox"/> Shared Pool	<input type="checkbox"/> Above Ground	
	<input type="checkbox"/> Non Shared Pool	<input type="checkbox"/> Inground	
	Number of pools on site:	<input type="checkbox"/> Spa	
	Number of pools to be inspected:	<input type="checkbox"/> Indoor Pool	
		<input type="checkbox"/> Other	
REASON FOR APPLICATION (Tick applicable boxes)	<input type="checkbox"/> Leasing	<input type="checkbox"/> Sale of Property	<input type="checkbox"/> Initial Safety Certificate
	<input type="checkbox"/> Other		
	Date of Required inspection:		
APPLICANT DETAILS	Business/ Applicant Name		
	Contact Person		
	Postal Address		
	Locality/ Town	State	Postcode
	Phone	Email	
	PROPERTY & OWNER DETAILS (If same as above please complete additional required details)	Full Owner/s Name	
Property Address			
Locality/ Town		State	Postcode
Lot		Plan	
Description of property (e.g Dwelling, unit, vacant, etc)			
DECLARATION	<i>Applicant Declaration: I declare that I am authorised to make this Application and that all the information provided in this application is true and correct. I have read the information contained in this application Form and agree to comply with the said information.</i>		
	APPLICANTS SIGNATURE		
PRIVACY NOTICE	Banana Shire Council is collecting your personal information to process your application. The information will not be disclosed to any other person or agency external to council without your consent, unless required by or authorised by law. Personal information will be handled in accordance with the <i>Information Privacy Act 2009</i> .		
OFFICE USE ONLY	Total Paid \$	Receipt No.	Date.