

## 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*