

APPLICATION FOR A SWIMMING POOL COMPLIANCE CHECK
Building Regulation 2018 / Part 9A
Building Act 1993

To: B4UBuild Building Consultants

From:

Owner/Agent of Owner:
Postal Address: Postcode:
Contact Person: Ph:
Email:

Ownership Details (only if agent of owner listed above)

Name:
Postal Address: Postcode:
Contact Person: Ph:
Email:

Property Details

Number		Street / Road		City / Suburb / Town			Postcode
Lot/s	LP/PS	Volume	Folio	Crown Allotment	Section	Parish	Country
Municipality							

Type of swimming Pool / Spa (Please tick)

Pool - Above Ground Spa - Ground Level
Pool - Partially submerged Spa - Other
Pool - Ground Level Other: _____

What year was the pool constructed?

Prior to 8th April 1981 After 1st May 2010 on wards
Between 9th April 1981 and 30 April 2010

Was a building permit issued for the swimming pool YES NO Unsure

Please provide copies of any relevant building permit if available and/or any other information or documentation that provides evidence of when the swimming pool or spa was constructed. (This will help to determine which regulations to use to ensure your pool/spa is compliant.)

Has there been any other building work that has altered or resulted in changes to the barrier since the swimming pool or spa was constructed or erected? YES NO

If yes, please provide details and copies of any relevant building permit or other documentation.

Signature of Owner or Agent **Date**