

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 [www.swimmingpoolregister.nsw.gov.au](http://www.swimmingpoolregister.nsw.gov.au) 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 pool

### 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



**Wyong Office:** 2 Hely St / PO Box 20 Wyong NSW 2259 | **P** 02 4350 5555

**Gosford Office:** 49 Mann St / PO Box 21 Gosford NSW 2250 | **P** 02 4325 8222

**E** ask@centralcoast.nsw.gov.au | **W** www.centralcoast.nsw.gov.au | **ABN** 73 149 644 003

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

Contact Name

Phone No

Email Address

Access Details

**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.

## 9. 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