



Form 22

Regulation 147P(1)

Building Act 1993

Building Regulations 2018

**APPLICATION TO REGISTER A
SWIMMING POOL OR SPA**

Ownership Details:

Name of owner of the land (the property) on which the swimming pool or spa is located:

Postal address:

Telephone number:

Email address:

Property details:

Number:	Street/road:		
City/suburb/town:		Postcode:	
Lot/s:	LP/PS:	Volume:	Folio:
Crown allotment:	Section:	Parish:	County:
Municipal district: Rural City of Wangaratta			



Type of swimming pool or spa:

- Permanent swimming pool
- Permanent spa
- Relocatable swimming pool
- Relocatable spa

For permanent swimming pools and permanent spas, the approximate date that the swimming pool or spa was constructed:

(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)

For relocatable swimming pools and relocatable spas, the approximate date that the swimming pool or spa was erected:

Is there any other building work that has altered or resulted in changes to the barrier since the swimming pool or spa was constructed or erected? *If yes, please provide details and copies of any relevant building permit or other documentation*

Signature:

Signature of applicant

Date: _____

When completed, please email to: **buildingmail@wangaratta.vic.gov.au**