# Public Pool/Spa Premises Registration

Public Health Act 2010, Public Health Regulations 2022 and Local Government Act 1993

| OFFICE USE ONLY |  |
|-----------------|--|
| Reference No.   |  |

## **About this form**

Use this form to apply to register your swimming pool or spa provided for the use by the public. Use this form to register new premises or to make changes to registration for existing premises.

Public swimming pools and spa pools include swimming pools and spa pools provided for use by the public at:

- Hotels, motels, guest houses, holiday units or similar facilities
- Private residential pools used for commercial purposes
- Workplaces
- Schools/Hospitals

| Proposal (choose One Only) |                      |            |        |              |            |  |  |
|----------------------------|----------------------|------------|--------|--------------|------------|--|--|
| ☐ New Busi                 | ss                   |            |        |              |            |  |  |
| Applicant details          |                      |            |        |              |            |  |  |
| Title:                     | □ Mr                 | □ Mrs      | □ Ms   |              | ☐ Other    |  |  |
| First Name:                |                      |            | Family | y Name:      |            |  |  |
| Trading Nam                | ne (if applicable):  |            |        |              |            |  |  |
| Company Na                 | ame (if applicable): |            |        |              |            |  |  |
| ABN/ACN (if applicable):   |                      |            |        |              |            |  |  |
| Address:                   |                      |            |        |              |            |  |  |
| Suburb:                    |                      |            | State  | e:           | Post Code  |  |  |
| Email Addres               | ss:                  |            |        |              |            |  |  |
| Daytime Tele               | ephone No. (Home/Wor | k):        | Mo     | bile No:     |            |  |  |
| Property I                 | Details              |            |        |              |            |  |  |
| Lot No(s):                 |                      | Section:   |        | DP/SP Number | :          |  |  |
| Unit No:                   |                      | Street No: |        | Street Name: |            |  |  |
| Suburb:                    |                      |            |        |              | Post Code: |  |  |

CM reference: 23/170113 | Last updated: 20/07/2023

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Postal address PO Box 21, Rockdale NSW 2216 **Bayside Customer Service Centres** Rockdale Library, 444-446 Princes Highway, Rockdale Eastgardens Library, Westfield Eastgardens, 152 Bunnerong Road, Eastgardens

W www.bayside.nsw.gov.au T 1300 581 299

| Business trading name premises details                                                                                                                                                                                                           |                  |           |                     |                   |              |       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------|---------------------|-------------------|--------------|-------|
| Business/Trading Name:                                                                                                                                                                                                                           |                  |           |                     |                   |              |       |
| ABN/ACN:                                                                                                                                                                                                                                         |                  |           |                     |                   |              |       |
| Company Contact Name:                                                                                                                                                                                                                            |                  |           |                     |                   |              |       |
| Address:                                                                                                                                                                                                                                         |                  |           |                     |                   |              |       |
| Suburb:                                                                                                                                                                                                                                          | State:           |           | Pos                 | t Code:           |              |       |
| Email Address:                                                                                                                                                                                                                                   |                  |           |                     |                   |              |       |
| Daytime Telephone No. (Home/Work):                                                                                                                                                                                                               | Mobile No:       |           |                     |                   |              |       |
| Development Consent (DA) or Complying Development                                                                                                                                                                                                | anmont Carti     | ficato (  | CDC                 | Dotoilo           |              |       |
|                                                                                                                                                                                                                                                  | opinent Certi    | ilicate ( | CDC                 | Details           |              |       |
| DA/CDC Number:                                                                                                                                                                                                                                   |                  |           |                     | Applicatio        | n Code       |       |
| Fees                                                                                                                                                                                                                                             |                  |           |                     |                   |              |       |
| Registration Fee for new Regulated premises or change of ow                                                                                                                                                                                      | مالمهمام مامامين | \$65.00   |                     | RC 15050          |              |       |
| Registration ree for new Regulated premises of change of ow                                                                                                                                                                                      | nersnip details  | φ65.00    |                     | KC 15050          |              |       |
| Registration Fee for new Regulated premises of change of ow                                                                                                                                                                                      | nersnip details  | φου.υυ    |                     | KC 15050          |              |       |
| Supporting Documentation                                                                                                                                                                                                                         | nersnip details  | φοσ.σο    |                     | KC 15050          |              |       |
|                                                                                                                                                                                                                                                  | nersnip details  | •         | pplica              | ant Use           | Offic        | e Use |
|                                                                                                                                                                                                                                                  | nersnip details  | •         | <b>pplica</b><br>No |                   | Offic<br>Yes | e Use |
|                                                                                                                                                                                                                                                  | nersnip details  | Α         |                     | ınt Use           |              |       |
| Supporting Documentation                                                                                                                                                                                                                         | nersnip details  | Yes       | No                  | ent Use<br>Exempt | Yes          | No    |
| Supporting Documentation                                                                                                                                                                                                                         | nersnip details  | Yes       | No                  | ent Use<br>Exempt | Yes          | No    |
| Supporting Documentation  1. Development or Consent Documentation                                                                                                                                                                                | nersnip details  | Yes       | No                  | ent Use<br>Exempt | Yes          | No    |
| Supporting Documentation  1. Development or Consent Documentation  Declaration                                                                                                                                                                   |                  | Yes       | No 🗆                | Exempt            | Yes          | No 🗆  |
| Supporting Documentation  1. Development or Consent Documentation  Declaration  I declare that the information given is true and correct.  I understand that if incomplete, the application may be return.                                       |                  | Yes       | No 🗆                | Exempt            | Yes          | No 🗆  |
| Supporting Documentation  1. Development or Consent Documentation  Declaration  I declare that the information given is true and correct.  I understand that if incomplete, the application may be return requested within 21 days of lodgement. |                  | Yes       | No                  | Exempt            | Yes          | No 🗆  |
| Supporting Documentation  1. Development or Consent Documentation  Declaration  I declare that the information given is true and correct.  I understand that if incomplete, the application may be return requested within 21 days of lodgement. |                  | Yes       | No                  | Exempt            | Yes          | No 🗆  |

# How to lodge this application

You can lodge your completed application form and any required supporting documents:

#### **Online**

You can lodge your application using Bayside Councils online services at www.bayside.nsw.gov.au

## In person

At any of Council's Customer Service Centres:

- Rockdale Customer Service Centre: 444-446 Princes Highway, Rockdale NSW 2216
- Eastgardens Customer Service Centre: Westfield Eastgardens, 152 Bunnerong Road, Eastgardens NSW 2036

### By mail

Post to Bayside Council: PO Box 21, Rockdale NSW 2216 with payment via cheque or money order (do not send cash.

Payment is preferred by cheque, money order, debit or credit cards (Visa and Mastercard). Payments made using a credit card will incur a service fee of 0.5%

## **Privacy notification**

Completion of this document is voluntary - partially completed applications may result in refusal of the application. The personal information provided on this form (including your name and other details) will be handled in accordance with the Privacy and Personal Information Act 1998 and may be available to the public under various legislation

| OFFICE USE ONLY |      |    |  |  |  |
|-----------------|------|----|--|--|--|
| Receipt No      | Date | \$ |  |  |  |

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