NEW HOME Certification Group



POOL COMPLIANCE CERTIFICATE APPLICATION FORM Date received (office use only):

1. APPLICANT, OWNER AND PROPERTY DETAILS										
APPLICANT DETAILS										
First Name					Surname					
Street Address										
Suburb					Postcode					
Telephone					Email					
OWNERS DETAILS										
Owner 1				Owner 2	Owner 3				Owner 4	
First Name										
Surname										
Street Address										
Suburb										
Post Code										
Telephone										
Email										
PROPERTY LOCATION										
Lot No.: Deposited Plan (DP):										
House No.:					Street Name:					
Suburb:					Post Code:					
INVOICE DETAILS										
○ Applicant										
Owner										
Other Comp			any Name:				ABN:			
	А	Addres	ss:							
Email		mail:						Mobile:		
2. APPLICANTS & OWNERS CONSENT										
I/We the applicant/owners of the subject property hereby give consent for the lodgement of this request and associated documentation to New Home Certification Group Pty Ltd for consideration. I/We also give authorisation for the entry by New Home Certification Group staff onto the subject premises.										
Applicant Signature:						Name:			Date:	
Owner 1 Signature:			Owner 2 Sig		Owner 3 Signature:			Owner 4 Signature:		
Name:			X Name:		X Name:			X Name:		
INGITIE.			ivallie;			ivalle;			ivaille.	
Date:			Date:			Date:			Date:	
3. DOCUMENT REQUIRED TO PROCEED										

☐ Pool Registration Certificate

Inspection and Certificate fees payable up front. Allow 3 working days for invoice to be issued