



**NSW Ministry of Health
Section 35(2) Public Health Act 2010
Clause 19 Public Health Regulation 2012**

Notification of Public Swimming Pool or Spa Pool

Local Government Authority Area: **SINGLETON COUNCIL**

Types of Pool(s): _____

Address of Premises: _____

Telephone of Pool Premises: _____

Name of Occupier of Premises: _____

ABN or ACN (if any): _____

Occupier Residential Address: _____

Occupier Contact Details:

Residential Telephone: _____

Mobile Telephone: _____

EMail: _____

This notice is to be accompanied by the fee (not exceeding \$100) determined by the local government authority

NOTES:

1. The local government authority must be notified within 7 days of any change of particulars.