Request for Settlement Inspection 2025-26



I am the <u>current</u> owner. I give permission for the City of Busselton to inspect the swimming pool / spa barrier at my property mentioned below.

Name:			Signature:	
Date:			Settlement Date:	
Property D	etails			
House No:		Street:		
Locality:				
Contact Pe	erson for Invo	oice		
Name:				
Phone:				
E-mail:				
(if more than	ection on Sale of 1 year from nexterson for Insp	inspection	due)	\$184.00
Name:	•			
Phone:				
E-mail:				
☐ Tick if a	PLEASE RET	URN THIS	FORM TO: city@busselton.wa.gov.au any other address may cause delays.	
			OFFICE USE ONLY	
NOTES				
INSPECTION I	DATE			

For more information, go to www.busselton.wa.gov.au/develop/swimming-pools.aspx

All Communications to: