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CLIENT INFORMATION – SWIMMING POOL

Date:
 Stand No:Account No. (Electricity Bill).....
 House No:
 Street Name:Suburb:.....
 Town:
 E-mail:
 Contact No:

PROPOSED CONSTRUCTION (INDICATE WITH X)

<input type="checkbox"/> Swimming Pool
<input type="checkbox"/> Other













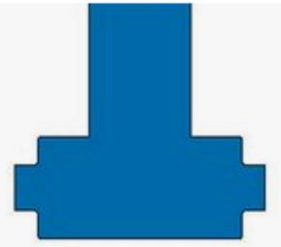
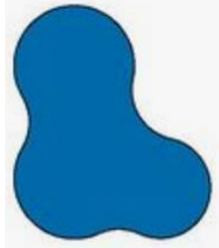
REQUIRED DOCUMENTS

	RECIEVED	OUTSTANDING
ID Document		
Title Deed		
Zoning Certificate		
Letter signed by adjoining property Owners		
Water and Lights Account		
Existing Building or Site Layout		

SUBMISSION OF PLANS (INDICATE WITH X)

Body Corporate <input type="checkbox"/> Yes <input type="checkbox"/> No	Municipality <input type="checkbox"/> Yes <input type="checkbox"/> No
Other	Comments:

PROPOSED SWIMMING POOL SHAPE AND SIZE (INDICATE WITH X)

<input type="checkbox"/> RECTANGLE 	<input type="checkbox"/> CELEBRITY 	<input type="checkbox"/> MARTINIQUE 
<input type="checkbox"/> OVAL 	<input type="checkbox"/> DOUBLE ROMAN END 	<input type="checkbox"/> ROMAN END 
<input type="checkbox"/> GOTHIC 	<input type="checkbox"/> OASIS 	<input type="checkbox"/> MOUNTAIN POND 
<input type="checkbox"/> LAZY ELL 	<input type="checkbox"/> TRUE ELL 	<input type="checkbox"/> GRECIAN TRUE ELL 
<input type="checkbox"/> TEE 	<input type="checkbox"/> LAGOON 	<input type="checkbox"/> OTHER
DIMENSTIONS – LENGTH		X WIDTH
WATER CAPACITY -		

ELECTRICAL



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PROPOSED ELECTRICAL SOCKET (INDICATE WITH X)

Swimming Pool	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 1 2 3 4 5+	Comments:
Other	Comments:	

PROPOSED ELECTRICAL LIGHTS (INDICATE WITH X)

Swimming Pool	Standard <input type="checkbox"/> Fluorescent 1 Tube <input type="checkbox"/> Fluorescent 1 Tube <input type="checkbox"/> Other <input type="checkbox"/>	Comments:
Other	Comments:	

PROPOSED ELECTRICAL OTHER (INDICATE WITH X)

Solar Heating	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
Heat Pump	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
Other	Comments:	

Owner:.....

Signed at.....on this.....Day.....Month.....Year.....