



## Pool Safety Inspection- booking

### Payment must be received before inspection

Please send invoice via

Address: \_\_\_\_\_

I'll come into the office

Email: \_\_\_\_\_

(internet transfer, cheque, cash, credit card only over the counter at office)

Circle suitable day

**Tuesday**

**Thursday**

**Name:** \_\_\_\_\_

**Site Address:** \_\_\_\_\_

\_\_\_\_\_

**Contact details:** \_\_\_\_\_

**Date & Time (am/pm) of inspection: (office use only)**

\_\_\_\_\_

When forwarding this booking form to Bonafide we will contact you to confirm the day of inspection. Unfortunately we cannot give an exact time due to certifiers commitments but can call you ½ hour to 1 hour before, if stated.

### **Notes:**

**Will there be access to the premises if no one is home?**

Yes/No (I would rather be home at the time of inspection)

Details: \_\_\_\_\_

**Please call:**                      ½ hour before inspection                      1 hour before inspection

**Are there any dogs on the premises if no one is home?**                      Yes/No

Details: \_\_\_\_\_