**Notice - Territorial Authority Not Accepting a Certificate of Inspection**

This form is for a territorial authority to notify MBIE that it has not accepted a Certificate of Inspection submitted by an Independently Qualified Pool Inspector (Pool Inspector). A territorial authority must notify MBIE within seven days of that decision.

The completed form can be saved and emailed to: poolinspectors@mbie.govt.nz

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| ***Part 1: Details of Territorial Authority*** |
| **Territorial Authority:** | Click here and enter Territorial Authority. |
| **Address:** |
| **Street Number & Name:** | Click here and enter Street Number & Name. |
| **Suburb:** | Click here and enter Suburb. |
| **City:** | Click here and enter City. |
| **Contact Person:** | Click here and enter Contact Person Name |
| **Position title:** | Click here and enter Position Title |
| **Phone Number:** | Click here and enter Phone Number. |
| **Mobile Phone Number:** | Click here and enter Phone Number. |
| **Email Address:** | Click here and enter Email Address.  |

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| ***Part 2: Details of the pool inspected***  |
| ***Street Address:*** | Click here and enter Street Address.  |
| **Suburb:** | Click here and enter Suburb. |
| **Town/City:** | Click here and enter City. |
| ***Name of Owner:*** | Click here and enter Name of Owner |
| **Owner’s Daytime Phone Number:** | Click here and enter Phone Number. |
| **Owner’s Mobile Phone Number:** | Click here and enter Phone Number. |
| **Owner’s Email Address:** | Click here and enter Email Address.  |

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| ***Part 2: Details of the Pool Inspector you are complaining about*** |
| **Pool Inspector Registration number:** | Click here and enter Registration Number. |
| **Title:** | Click here and enter Title. |
| **\*Legal/Family Name:** | Click here and enter Legal/Family Name. |
| **\*Legal First/Given Names:** | Click here and enter Legal First/Given Names. |
| **First name known as:** **(if different from above)** | Click here and enter Name. |
| **Company Name (if applicable):** | Click here and enter Company Name. |
| ***Street Address:*** | Click here and enter Street Address.  |
| **Suburb:** | Click here and enter Suburb. |
| **Town/City:** | Click here and enter City. |
| **Daytime Phone Number:** | Click here and enter Phone Number. |
| **Mobile Phone Number:** | Click here and enter Phone Number. |
| **Email Address:** | Click here and enter Email Address.  |

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| ***Part 3: Reason for not accepting the certificate of inspection*** |
| ***Please provide as much detail as possible (including dates) about the problem or conduct you are complaining about. You may wish to refer to the ‘Grounds for Complaint’ detailed at the back of this form.***  |
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| ***NOTE: Please attach further details on a separate piece of paper if there is insufficient room above*** |

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| ***Part 4: Evidence***  |
| ***Please detail any evidence you are able to provide to support your reasons for not accepting the certificate.*** |
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| ***NOTE: Please clearly label are attach PDF copies of any evidential documents and/or photographs to support your complaint*** |

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| ***Part 6: Declaration*** |
| 1. I agree to all documentation relating to this complaint being released to all parties involved and declare that the information I have supplied in this form is true and correct. I understand it is an offence under the Building Act 2004 to provide false or misleading information
2. I am aware that all information I provide is subject to public release. If the Ministry receive a request for this material they will be required to consider its release, in whole or in part, in terms of the criteria set out in the Official Information Act 1982. The Act requires the information to be made available unless (1) it is considered that there is a good reason, under the Act to withhold the information; (2) that good reason out weights the desirability, in the public interest, of making the information available. The grounds for withholding the information are set out in the Official Information Act 1982.

(Please advise the Ministry in writing if you have any objection to the release of any of the information/evidence you have provided and the reasons you believe it should be withheld). |
| ***Name:*** Click here to enter text.***Date:*** Click here to enter a date.***Position:*** Click here to enter text.***Signature:***  |

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| ***Grounds for Not Accepting a Certificate***  |
| ***The grounds on which Territorial Authorities may refuse to accept a certificate include:**** ***Concerns about the competency of the inspection***
* ***The pool inspector is not registered***
* ***The pool inspector has made recommendations or decisions beyond their authority in relation to the inspection***
* ***Evidence of conflict on interest in relation to the inspection.***
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