



PERMIT FOR SWIMMING POOL Application

Permit Fees: Pool — \$150.00 Wading - \$150.00 Special Purpose - \$150.00

Permit Expiration Date:

Application Submission Date:

Name of Pool:	
Address of Pool:	
Phone Number at Pool:	
Contact Person Name:	
Home Address of Contact Person:	
Main Contact Home Phone:	Main Contact 24 hr Emergency Phone:
E-mail Address of Main Contact Person:	
Alternate Contact Person Name (<i>must have an alternate</i>):	
Home Address of Alt. Contact Person:	
Alt. Contact Home Phone:	Alt. Contact 24 hr Emergency Phone:
E-mail Address of Alternate Contact Person:	

continued on next page...



PERMIT FOR SWIMMING POOL Application

Type of Pool (<i>check one only</i>)		
<input type="radio"/> Public	<input type="radio"/> Semi Public	<input type="radio"/> Wading <input type="radio"/> Special Purpose
Volume of Pool:	Length:	Width:
Non-Swimming Area:		Swimming Area:
Diving Area:		Bather Load:
Filter Effluent Flow Meter Setting:		# of Turnovers per 24 Hours:
Skimmer Type:		Method of Water Treatment:
# of Lifeguards:		
Variance for No Lifeguards Requested of Board of Health:		<input type="radio"/> Yes <input type="radio"/> No
Days and Hours of Pool Operation:		
Days and Hours of Pool Operation without Lifeguards:		
Name of Certified Pool Operator (CPO):		
CPO Home or (<i>if applicable</i>) Pool Company Address:		
CPO Phone #:		CPO 24 hr Emergency Phone:
<i>(Please provide documentation of CPO certification and lifeguard training)</i>		

I understand that by signing this I am attesting to the accuracy of the information provided in this application and I affirm that the swimming pool operation will comply with 105CMR 435.000 and all other applicable law.

Signature of Applicant

Date

Official Title

For BOH Use Only

Date Application Received:	Current Permit Expires:
No Lifeguard Variance Granted: <input type="radio"/> Yes <input type="radio"/> No	Date of BOH Meeting: