

## **POOL PERMIT APPLICATION**

Date: _____	Phone: _____
Applicant Name: _____	Tax Map No.: _____
Site Address: _____	Mailing Address: _____ (If Different from Site Address)
Contractor Name & Phone #: _____	
Pool Type & Size: <input type="checkbox"/> Above Ground	Dimensions (in feet): _____ Height _____ Round _____ Oval
<input type="checkbox"/> In Ground	Dimensions (in feet): _____ Length _____ Width
Setback From Side of Property Line: _____	Setback From Rear of Property Line: _____

**Ensure all items below are checked off and complete:**

- Application must be filled out completely.
- Attach a sketch of the proposed pool site to this application.
- Install temporary barrier around pool construction site prior to commencing work (in-ground pools only).

In consideration of the granting of the requested permit, the applicant agrees to comply with all applicable Town of Kingsbury code(s) and New York State Uniform Fire Prevention and Building Code.

**Site inspection must be completed by the Town’s Code Enforcement Officer PRIOR to permit issuance.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<p><b>NOTICE</b></p> <p><b><u>Must complete all items in this checklist prior to the final inspection:</u></b></p>	<input type="checkbox"/> Ladder (lockable) <input type="checkbox"/> Pool Alarm* <input type="checkbox"/> Electrical Inspection <input type="checkbox"/> Fence _____(Type)    _____(Height) <input type="checkbox"/> Gate: <input type="checkbox"/> Self-Closing <input type="checkbox"/> Self-Latching <input type="checkbox"/> Lock <p>*Pool alarm must be audible near the pool AND inside the dwelling.</p>
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\_\_\_ Original Application    \_\_\_ Applicant’s Copy (provided with approved permit)