

APPLICATION FOR SWIMMING POOL PERMIT (GREEN)

1. This form is used for inground and above ground pools. A Zoning Application is also needed along with the information drawn to scale on a copy of Plot Plan. Two sets of specifications on the pool need to be submitted along with the application (on above ground pools a pamphlet or color brochure is acceptable).
2. There is a Pool Packet to give out for all information on pools for applicant.
3. In addition to the Application for Swimming Pool Permit, an Electrical Permit Application is needed. The electrical work completed on the pool needs to be completed by a licensed electrician.
4. If the Pool and Electrical Applications are submitted together, add the electrical cost to the pool cost and charge only one charge and \$0.00 for the electrical. (Saves money for the applicant)
5. Inground pools require an Erosion and Sedimentation Bond form and \$500 check, to be held until the work is completed.

APPLICATION FOR SWIMMING POOL PERMIT

TOWN OF NEWINGTON, 200 GARFIELD STREET, NEWINGTON CT 06111

TEL. NO. 860-665-8580 FAX NO. 860-665-8577-BUILDING DEPARTMENT

APPLICATION MUST BE FILLED OUT COMPLETELY IN INK

JOB LOCATION: _____

CONTRACTOR'S NAME: _____ TEL. NO. _____

CONTRACTOR'S ADDRESS: _____ CITY _____ ST _____

_____ ZIP CODE _____ STATE REG. NO. _____

(HOME) OWNER'S NAME _____ TEL. NO. _____

(HOME) OWNER'S ADDRESS _____

DETAILED DESCRIPTION OF WORK TO BE PERFORMED: _____

TOTAL VALUE OF WORK TO BE PERFORMED: \$ _____

TYPE OF POOL: ABOVE GROUND ___ BUILT IN ___ SIZE OF POOL _____ X _____

WILL POOL HAVE UNDERWATER LIGHTING? YES _____ NO _____

A SELF CLOSING / LATCHING GATE IS REQUIRED FOR ALL POOLS

TYPE OF POOL FENCE: _____ DOES FENCE HAVE GATE: YES ___ NO ___

HEIGHT OF POOL FENCE _____ IS GATE SELF-LOCKING: YES ___ NO ___

ALL WORK COVERED BY THIS APPLICATION HAS BEEN AUTHORIZED BY THE (OWNER) OR (AGENT) OF THIS PROPERTY AND WILL BE DONE ACCORDING TO STATE CODES AND REGULATIONS. **NO WORK SHALL BE STARTED UNTIL THE BUILDING DEPARTMENT HAS RECEIVED THIS APPLICATION AND HAS ISSUED A BUILDING PERMIT. ALL PERMITS APPROVED SUBJECT TO FIELD INSPECTIONS.**

SIGNED _____

(applicant)

(date)

(Tel. No.)

Please print name _____ E-MAIL: _____

PERMIT FEE \$ _____

REC'D BY: _____

ZONING FEE \$ _____

TOTAL PAID \$ _____

DATE: _____

APPROVED BY: _____ DATE: _____

PERMIT NO.: _____

NOTE: CALL BUILDING DEPARTMENT FOR REQUIRED INSPECTIONS

24 HOUR NOTICE IS REQUIRED (860-665-8580)