

Permit application for Swimming, Wading and Special Purpose Swimming Pool

	POOL INFORMATION
Name of Pool	
	Town
MAILING ADDRESS	Town
	Phone #
	Phone #
Email(s) for Owner and Operator:	
	Month/Year course taken
Plans enclosed: yes or no (circle one)	
<u>G</u>	GENERAL INFORMATION
True of Dool. In amound/Above Change	I/Oth on
	/Other
Pool Volume (gallons)	
Maximum Pool Capacity (bather load)_	
Virginia Graeme Raker Act compliant	
	_Quantity
Pool Trim & Finish (concrete, vinyl, or	other please indicate):
	sive)
	re)
WATER CIRCUI	LATION & FILTRATION INFORMATION
	Total filter area (per sq. ft.)
	Turn-over rate (gpm)
CO2 tanks (quantity)	Properly anchored: Yes or No
	DISINFECTION TYPE
	DisinfectionCapacity (lbs.)
	r; please indicate)
DPD Test Kit (reagents <1 year old)	
	(signature)
Date	_Title

Please include a copy of your CPO certification and paperwork indicating the expiration date for your VGB compliant suction fittings (drains) when submitting this application and fee.

FEE: \$130.00

Payable to the Nashoba Associated Boards of Health

(* There is a 15% processing charge on all refunds)

**105 CMR 435.00 Minimum Standards for Swimming Pools, State Sanitary Code can be accessed online at: www.mass.gov/dph/dcs, click on swimming pools.

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