

## **POOL PERMIT APPLICATION**

Date: _____	Permit No.: _____
Applicant Name: _____	Phone: _____
Address: _____	Property Location: _____
_____	_____
_____	_____
Contractor: _____	Tax Map No.: _____
Pool Type: _____	Ladder/Lockable: _____
Height from Grade or Fence Type: _____	Gate: Self Closing/Self Latching: _____
Setback Sideline/Rear Line: _____	_____

### **POOL ALARMS AND ELECTRICAL INSPECTIONS ARE REQUIRED ON ALL POOLS**

Sketch Site Below

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

Applicant Signature: _____	Date: _____
Approval Date: _____	Expiration Date: _____
Electrical Inspector: _____	CO Issued Date: _____