

TOWN OF MILLIS BOARD OF HEALTH

PRIVATE RESIDENTIAL SWIMMING POOL INSTALLATION APPLICATION

\$75.00 Fee

Homeowner: _____

Address _____ Phone # _____

Installer's Name _____ Certificate # _____

Installer's Address _____ Phone # _____

Location of Lot _____ Size of Lot _____

Application must include a plan of the lot showing the layout of the pool installation, sewage and drainage systems, location of well (if any) and the location of pool in relation to house, other buildings, fencing, and lot lines.

Size of Pool: _____ Length _____ Width _____ Maximum Depth _____

Type of Construction: _____

Vinyl Liner Gunite In-Ground Above-Ground

Type of Filter: Cartridge Diatomaceous Earth Sand Other

Heated: Yes No If so, Type of Heat _____

Water Supply: Municipal Well _____ # of Gallons

Sewer System: Municipal Septic

Time required to re-circulate entire contents of pool: _____

If DE Filter, Describe collection and disposal of DE: _____

Describe method of emptying pool (pool drainage): _____

Type of fencing (shall not be less than 5 feet in height) _____

Signature of Applicant: _____

Board of Health permit to construct a private residential swimming pool granted subject to the provisions of the "Millis Board of Health Swimming Pool Regulations".

Date of Approval: _____ Health Director _____

Cc: Building Department