

S/B/L #: \_\_\_\_\_

Permit #: \_\_\_\_\_

**TOWN OF SWEDEN**

**APPLICATION FOR PERMIT C  
SWIMMING POOL/SPA/HOT TUB**

1. Name and Address of Applicant: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

2. Name and Business Address of Contractor: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Workers' Compensation Requirements Under WCL §57 on file: Yes

3. Type of Property:

Residential  Commercial

4. Plot Plan attached, showing proposed pool/spa/hot tub location, dimensions, depth, and volume in gallons. Yes

5. Approximate cost of pool/spa/hot tub: \_\_\_\_\_

6. Applicant agrees that construction or location shall not be changed or expanded without amending permit.

\_\_\_\_\_  
Date Applicant

\_\_\_\_\_  
Date Building Inspector

Fees:	Aboveground	\$25.00	Final COC	_____
	Inground	\$50.00	Final Electrical Insp.	_____
	Hot Tub/Spa	\$25.00		
	Certificate of Compliance	\$25.00		

Total Fees: \_\_\_\_\_