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.

__________________________________________          Applicant

Date

__________________________________________          Building Inspector

Date

Fees:
Aboveground Pool - $50.00
Inground Pool - $65.00
Spa/Hot Tub - $50.00
Certificate of Compliance - $50.00