INSPECTIONAL SERVICES DEPARTMENT
1010 MASSACHUSETTS AVE BOSTON, MA 02118
(617) 635-5300 OR (617) 961-3271 (PERMIT COUNTER)

SWIMMING POOL AFFIDAVIT

To the City of Boston's Inspectional Services Department Commissioner,
I certify that I will install the swimming pool located on the property at;

_____St
reet Address City Zip Code Ward

To the best of my knowledge, information, and belief, the proposed swimming pool that is proposed will be in conformity with the City of Boston Zoning Code, the Massachusetts State Building Code, and all other pertinent laws and ordinances including; IRC Appendix G, IBC Section 3109.

Signature of Owner:_____

Address:_____

Phone Numbers: Home: (_____)_____ Cell: (_____)_____

Commonwealth of Massachusetts Suffolk ss:

Then personally appeared the name above:_____

and made an oath that the above statement by him/her is true.

Before me:_____

Date:____/____/____

My commission expires on: (Date)____/____/____

NOTE: The pool must be at least four (4) feet from every lot line and must be protected by a fence at least six (6) feet in height with a gate which is locked from the outside, and that if the pool is within ten (10) feet of a lot line, the fence is concealing to a height of at least six (6) feet.