



Inspectional Services

Michelle Wu, Mayor

APPLICATION FOR PERMIT TO OPERATE A SWIMMING, WADING, OR SPECIAL PURPOSE POOL

By Authority of Boston Public Health Commission

REKERIMENTU PA LISENSA PA ABRI/OPERA UN PISINA DI NATASON, PA KRIANSA O PA UN FIN

SPECIAL

Pa Autorizason di Kumison di Saudi Publiku di Boston

Application is hereby made for a permit to operate a: Public ___ Semi-Public ___ Indoor ___ Outdoor ___
Rekerimentu fetu pa es meu pa un lisensa pa opera un: Publiku ___ Semi-Publiku ___ Fitxadu ___ Abertu ___

Swimming Pool ___ Wading Pool ___ Special Purpose Pool ___
Pisina pa Natason ___ Pisina pa Kriansa ___ Pisina pa Finalidadi Spesial ___

Name of Facility _____
Nomi di Instalason

Address _____
Enderessu

Name of Certified Pool Operator _____
Nomi di Jerenti di Pisina Sertifikadu

Owner _____ Phone # _____
Donu No. de Telefoni

Home Address _____
Enderessu di Kaza

Signature _____ Email _____
Sinatura Email

Following section to be completed only for original application:

Kel parti seguinti ta prienxedu só pa rekerimentu original:

Sketch:
Dizenhu:

Length of Pool _____ Width of Pool _____ Depth of Pool _____
Kunprimentu di pisina Largura di Pisina Profundidadi di Pisina

Volume in Gallons _____ Source of Water _____
Volume na Galon Fornesedor/fonti di Agu

Size: Swimming Area (sq. ft.) 5 feet deep or greater _____
Tamanhu: Aria di Natason (sq. ft.) 5 pé o mas fundu

Size: Non Swimming Area (sq. ft) under 5 feet deep _____
Tamanhu: Aria pa banhu sakedu (sq. ft) menus di 5 pé di profundidadi

Diving Area Yes _____ No _____
Aria di Mergudju Sin Nau

Total Sq. Ft. _____ Maximum bather load _____ Number of lifeguards required _____
Total na Sq. Ft. Kapasidadi Maximu di banhistas Kantu/Nunbru di salva-vidas obrigatóriu

Mechanical information:
Infurmason di Parti Mekaniku:

Filter(s) Kind _____ Turn over rate in hours _____
Tipu di Filtru (s) Siklu kompletu mididu pa ora

Automatic Chlorinator Yes ___ No ___ Capacity _____
Klorador Automatiku Sin ___ Nau ___ Kapasidadi (libra pa 24 ora. pa 10,000/15,000 gal)
(pounds per 24 hrs. per 10,000/15,000 gal)

Emergency shut off switch for special purpose pool Yes ___ No ___ N/A ___
Interrupitor di imerjênsia pa pisina di fin spesial Sin ___ Nau ___ N/A ___

Trim and Finish:
Revestmentu y Akabamentu:

Pool walls and bottom _____ Color _____
Paredis y fundu di pisina Kor

Four (4) inch wide non-swimming area boundary line on bottom and walls of pool Yes ___ No ___ N/A ___
Kuatú (4) polegada di largura na linha divizória di aria sakedu na fundu y paredis di pisina Sin Nau
N/A

Skimmers:
Skumaderas:

In the wall _____ Number _____

Na pardi _____ Kantu ____

Perimeter Channel _____

Perimetru di kanal _____

Main drain (s):

Drenu (s) Prinsipal:

Anti-vortex in design Yes ___ No ___ N/A ___ Cover can only be removed with use of tools Yes ___ No ___

Modelu anti-vortex Sin ___ Nau ___ N/A ___ Tanpa ta abridu só ku ferramenta Sin ___ Nau ___

REMARKS

KUMENTÁRIUS
