



INSPECTIONAL SERVICES DEPARTMENT

Permit to Operate a Swimming Pool, Wading, Or Special Purpose Pool Application

Application is for a permit to operate a: Public: Semi-Public: Indoor: Outdoor

Swimming Pool: Wading Pool Special Purpose Pool

Name of Facility:

Address:

Name of Certified Pool Operator:

Owner: Telephone Number:

Home Address:

Signature:

Management Company Name:

Address: Telephone Number:

Email Address:

Pool Dimensions:

Length: Pool Width of Pool Depth of Pool

Volume in Gallons Source of Water

Size: Swimming Area (sq. ft.) 5 feet deep or greater:

Size: Non-Swimming Area (sq. ft.) under 5 feet deep:

Diving Area: YES NO

Total Sq. Ft.: Maximum bather load Number of lifeguards required:

Plan review scheduled date: Approved Date:



Mechanical Information:

Filter(s): Type Number Turnover rate in hours:

Automatic Chlorinator: YES NO Capacity: (Pounds per 24 hrs. per 10,000/15,000 gal)

Automatic Brominator YES NO Other Sanitizer

Emergency shut off switch for special purpose pool: YES NO N/A

Trim and Finish:

Pool walls and bottom materials: Color (Light):

Four (4) inch wide non-swimming area boundary line on bottom and walls of pool to separate from swim area: YES NO N/A

Skimmers:

In the wall: Number: Perimeter Channel:

Main Drain(s):

VGB: Certification for Compliance submitted: YES NO

Anti-vortex in design: YES NO

Cover can only be removed with use of tools: YES NO

Remarks:

Regulations are available at: <https://www.mass.gov/doc/105-cmr-435-state-sanitary-code-chapter-v-sanitary-standards-for-swimming-pools/download>

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