

# TOWN OF ROXBURY

## PROCEDURE FOR OBTAINING A POOL PERMIT

APPLICANT INSTRUCTIONS: Print or type all parts of this form.  
Plumbing, mechanical and electrical sections may be filled out by the  
contractors at a later date.

### PROPERTY INFORMATION

STREET ADDRESS

LOT #

### OWNER INFORMATION

LAST NAME

FIRST NAME(S)

MAILING ADDRESS

PHONE #

CITY

STATE

ZIP CODE

APPLICATION DATE

/ /

APPLICANT

ADDRESS

PHONE #

ENGINEER

ADDRESS

PHONE #

*I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction.. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.*

SIGNATURE OF APPLICANT

DATE

*ST Education fee per CT Gen Statute, Sec 29-263 shall be \$0.16 per \$1,000. of construction value. Eff 7-1-03*

**POOL INFORMATION**

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*General Contractor*

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*Address*

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*Phone #*

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*License #*

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*Estimated Construction Cost* *Date*

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(check where applicable) (circle)

TYPE - In-ground above-ground hot tub/spa

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SIZE -

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CONSTRUCTION *gunite/poured* *steel/fiberglass* *liner/other*

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DEMOLITION -

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**SWIMMING POOL SAFETY AGREEMENT**

*As the owner of the aforementioned property, I agree to comply with the 1999 Connecticut Building codes for swimming pool safety devices as follows, but not limited to:*

- \* 1996 BOCA/1999 Ct Supplement Chap – 421.10*
- \* 1999 National Electrical Code Chap – 690*
- \* Public Act 99-140 - Alarms for new Swimming Pools*

*OWNERS SIGNATURE:* \_\_\_\_\_

*Date:* \_\_\_\_\_

- *State brochure for “Enclosures for private swimming pools, spas, and hot tubs is available at the Building Department.*

**ELECTRICAL**

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*Contractor*

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*Address*

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*Phone #*

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*License #*

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*CRS #*

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*Estimated \$ Cost* *Date*

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*(check where applicable)*  
PANELBOARD

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TOTAL SERVICE

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TIMER SUPPLIED YES NO

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DESCRIPTION OF GROUNDING AND BONDING METHODS

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	No		No.	
WET NICHE LIGHTING FIX.				
RECEPTACLES				
JUNCTION BOXES/ OTHER ENCLOSURES				

**MECHANICAL**

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*Contractor*

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*Address*

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*Phone #*

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*License #*

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*Estimated \$ Cost* *Date*

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*(check where applicable)*  
*type of heating fuel*      GAS       OIL       OTHER

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*Description*

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