

BUILDING DEPARTMENT
VILLAGE OF CASTLETON-ON-HUDSON
P.O. BOX 126
CASTLETON, NY 12033
732-2211

APPLICATION FOR SWIMMING POOL PERMIT

APPLICATION DATE _____ PERMIT NO. _____

APPLICANT ' S NAME _____

ADDRESS _____

PHONE NO. _____

OWNER' S NAME _____

ADDRESS _____

PHONE NO. _____

GENERAL CONTRACTOR _____

NAME OF INSURANCE CARRIER _____

(Please submit Insurance Certificate)

Applicant's Signature

REQUIRED FOR PERMIT :

1. Application filled out completely
2. Insurance Certificate
3. Plot plan showing pool location, distances from property lines, and nearest structures
4. Application fee
5. Application to Electrical Underwriters for electrical approval

APPROVED BY _____
Building Inspector

(Application for Fence Permit will be required for pools over 18 inches in height.)