

TOWN OF CHENANGO POOL PERMIT APPLICATION
1529 NYS RT 12
BINGHAMTON, NEW YORK 13901

Phone#: 607-648-4809 X # 5

Fax#: 607-648-8511

Date: _____ Tax Map# _____ Fee: _____ Permit # _____
 Owners Name: _____ Owner's Phone # _____
 Building Location/Address: _____
 Pool Company: _____ Mailing Address: _____
 Phone # _____ E-mail: _____
 General Contractor _____ Mailing Address: _____
 Phone # _____ E-mail: _____
 Zoning: _____ Conforms: _____ Variance # _____ Review by PB ___ ZBA ___ ERB ___

Required Pool Information

ALL ITEMS BELOW MUST BE COMPLETE BEFORE A REVIEW WILL BE MADE CHECK

PERMIT FEE: \$50.00 _____
SWIMMING POOL: Permit required for any pool, capable of holding 24 inches of water _____
WORKERS COMP/ LIABILITY INSURANCE: Copy to our office _____
SITE PLAN: Setback dimensions to all property lines, all road, all structures, wells, septic's labeled
 Including > fence outline/location w/self-closing gate information (min 4 feet height)
 (2 inch clearance from grade)(Openings- max 4 inches) Copy to our Office _____
POOL W/ DECK: submit deck plans along with separate deck application _____
POOL ALARM - Type of alarm – stated clearly on site plan or copy of brochure _____
Alarm not required: -_A hot tub or spa equipped w/ a safety cover _____
 -Swimming pool w/ automatic power safety cover _____
MANUFACTURER POOL INFORMATION: brochure for this pool - Copy to our office _____
ELECTRICAL CERTIFICATION: Copy to our office before a CO is issued _____
Above Ground: _____ **in ground:** _____ **Hot Tub:** _____ **Spa:** _____
POOL SIZE: Round- _____ **Square/Rectangular:** _____ **Height:** _____
Liquid Capacity: _____ **gallons** **Motor Size:** _____ **HP** **Filter Make/Type:** _____
Method of Filling Pool: _____
FENCINIG/ BARRIER: All pools require a rigid 48 inch/4 foot minimal fence/barrier
 Completely surrounding Pool- show on plans- if house is part of
a barrier-auto pool safety cover per ASTM 1346 **OR** all doors equipped
 w/ audible alarm with continuous sound for 30 seconds upon opening
OR self-closing/ self-latching doors- ****Stated on site plan clearly**** _____
Other items _____
Pool pumps- Shall have timer switches _____
Pool Heaters- Automatic timer switch, No gas pilot flames, ON & OFF switch, and Pool heat
 90 degrees or more- pool cover shall meet an R-12 _____

Remarks: _____

No Pool can be occupied until approved by the Building Department by issuance of a "Certificate of Occupancy"

Owner or Applicant's Printed Name _____ **Date:** _____

Owner or Applicant's signature _____ **Date:** _____