

Date Received: _____

Permit No. _____

UPPER MILFORD TOWNSHIP ~ LEHIGH COUNTY, PA

PO Box 210, 5671 Chestnut Street

Old Zionsville, PA 18068

Phone: (610) 966 – 3223

Website: <http://www.uppermilford.net>

Pin No. _____

Zoning District: _____

POOL PERMIT APPLICATION

CONTACT INFORMATION:

Site Address: _____ Subdivision: _____

Property Owner: _____ Phone: _____ Fax: _____

Mailing Address: _____

Installer: _____ Phone: _____ Fax: _____

Mailing Address: _____

POOL INFORMATION:

POOL CLASSIFICATION:

☐ Private (Single Family Residence)

☐ Public (Includes all commercial)
(Building and Plumbing permits required)

POOL TYPE: (Specs Needed)

☐ Above Ground

☐ In Ground

☐ Spa

MISCELLANEOUS:

Pool Deck: ☐ No ☐ Yes

Walkway Width: _____

Slide: ☐ No ☐ Yes

Pool Walkway: ☐ No ☐ Yes

Diving Board: ☐ No ☐ Yes

Pump: (Specs Req'd) ☐ No ☐ Yes

Filter: (Specs Req'd) ☐ No ☐ Yes

ENCLOSURES / PROTECTIONS:

☐ Existing ☐ Proposed

Type of Fence Material: _____

Size / Description of fence: _____

☐ 4' Fence Around Pool

☐ 4' Fence Around Yard

☐ 4' Pool Wall Above Grade

☐ Lockable Pool Cover

☐ Alarm

☐ Self-Closing / Latching Gates

(with a latch minimum 48" above grade)

POOL HEATER:

(Building Permit Required)

☐ No ☐ Yes

☐ LPG ☐ Nat'l Gas

POOL DIMENSIONS:

Length: _____

Width: _____

Depth: _____

Capacity: _____ gal

POOL SETBACKS:

Front: _____

Rear: _____

Right: _____

Left: _____

PA One Call #: _____

Date: _____

SEWER: ☐ Public ☐ On Lot

ELECTRICAL INFORMATION:

Overhead / Underground Wires:

Type:

☐ Overhead

☐ Underground

Distance from Pool:

Vertical _____ Horizontal _____

Horizontal _____

Receptacles:

Type:

☐ GFCI Receptacle

☐ Non-GFCI

Distance from Pool:

Underwater Lights: ☐ No ☐ Yes

ESTIMATED COST OF CONSTRUCTION: (reasonable fair market value)

\$ _____

Signature of Owner or Authorized Agent

Print name of Owner or Authorized Agent

Date _____

THIS PAGE FOR OFFICE USE ONLY

INSPECTIONS:

APPROVED

DENIED:

- ☐ ZONING
☐ BUILDING
☐ ELECTRIC
☐ PLUMBING
☐ SEO

(*As per plans with Isolation distances met)

POOL FEES:

FEES

APPLICANT NOTIFIED

In-Ground Pool Fees: \$ _____
Above-Ground Pool Fees: \$ _____
Spa / Hot Tub \$ _____
Total Pool Fees: \$ _____
Non-Refundable Application Fee: \$ 60.00
Balance After Application Fee Reduction \$ _____
Note: Non-Refundable Application Fee will be used towards final fees due.

DATE: _____
RECEIPT # _____
RECEIPT # _____
RECEIPT # _____
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RECEIPT # _____

FOR CODE ADMINISTRATOR USE ONLY:

POOL Permit Approved:

☐ Yes

☐ No

Code Administrator's Signature

Date

APPROVAL CONDITIONS:

PROJECT DOCUMENTS (DRAWINGS AND CALCULATIONS):

<u>Type of Document:</u>	<u>Submitted:</u>	<u>Signed and Sealed:</u>	<u>Date:</u>	<u>Revision Date:</u>
Specifications Pool	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Flood Hazard Area Data	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Workers Comp. Certificate	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Barrier Specifications	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Site Plan	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Sediment and Erosion Cont.	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____