

Date Received: \_\_\_\_\_

Permit No. \_\_\_\_\_

**UPPER MILFORD TOWNSHIP ~ LEHIGH COUNTY, PA**

PO Box 210, 5671 Chestnut Street  
Old Zionsville, PA 18068

Pin No. \_\_\_\_\_

Zoning District: \_\_\_\_\_

Phone: (610) 966 – 3223; Fax: (610) 966 – 5184  
Website: http://www.uppermilford.net

**POOL PERMIT**

**CONTACT INFORMATION:**

*Check who is responsible for permit.*

Site Address: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

General Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

**POOL INFORMATION:**

**POOL CLASSIFICATION:**

- Private (Single Family Residence)
- Public (Includes all commercial)  
(Building and Plumbing permits required)

**ENCLOSURES / PROTECTIONS:**

- Existing     Proposed
- Type of Fence Material: \_\_\_\_\_

**POOL DIMENSIONS:**

Length: \_\_\_\_\_  
Width: \_\_\_\_\_  
Depth: \_\_\_\_\_  
Capacity: \_\_\_\_\_ gal

**POOL TYPE:** (Specs Needed)

- Above Ground
- In Ground
- Spa

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 SETBACKS:**

Front: \_\_\_\_\_  
Rear: \_\_\_\_\_  
Right: \_\_\_\_\_  
Left: \_\_\_\_\_

**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

**POOL HEATER:**  
(Building Permit Required)

- No     Yes
- LPG     Nat'l Gas

**PA ONE CALL #** \_\_\_\_\_

Date \_\_\_\_\_

**ELECTRICAL INFORMATION:**

**Overhead / Underground Wires:**

**Type:**  
 Overhead    **Distance from Pool:**  
 Underground    Vertical \_\_\_\_\_ Horizontal \_\_\_\_\_  
Horizontal \_\_\_\_\_

**Receptacles:**

**Type:**  
 GFCI Receptacle    **Distance from Pool:** \_\_\_\_\_  
 Non-GFCI    \_\_\_\_\_

**Underwater Lights:**     No     Yes

**ESTIMATED COST OF CONSTRUCTION:** (reasonable fair market value)    \$ \_\_\_\_\_

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**INSPECTIONS:**

**APPROVED**

**DENIED:**

<input type="checkbox"/> ZONING	_____	_____
<input type="checkbox"/> BUILDING	_____	_____
<input type="checkbox"/> ELECTRIC	_____	_____
<input type="checkbox"/> PLUMBING	_____	_____
<input type="checkbox"/> _____	_____	_____

**POOL FEES:**

**FEES**

**APPLICANT NOTIFIED**

In-Ground Pool Fees: \$ \_\_\_\_\_

Above-Ground Pool Fees: \$ \_\_\_\_\_

Spa / Hot Tub \$ \_\_\_\_\_

Total Pool Fees: \$ \_\_\_\_\_

Non-Refundable Application Fee: \$ 20.00

Balance After Application Fee Reduction \$ \_\_\_\_\_

Note: Non-Refundable Application Fee will be used towards final fees due.

DATE: \_\_\_\_\_

RECEIPT # \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print name of Owner or Authorized Agent

**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"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Flood Hazard Area Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Workers Comp. Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Barrier Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Site Plan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Sediment and Erosion Cont.	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____