



# TOWN OF MILLIS

## BOARD OF HEALTH

900 Main Street • Millis, MA 02054

Phone: 508-376-7042

### PRIVATE RESIDENTIAL SWIMMING POOL INSTALLATION APPLICATION - FEE \$97.00

Homeowner: \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Installer's Name \_\_\_\_\_ Certificate # \_\_\_\_\_

Installer's Address \_\_\_\_\_ Phone # \_\_\_\_\_

Location of Lot \_\_\_\_\_ Size of Lot \_\_\_\_\_

Application must include a certified plan of the lot showing the layout of the pool installation, sewage and drainage systems, location of well (if any) and the location of pool in relation to house, other buildings, fencing, and lot lines.

Size of Pool: \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Maximum Depth \_\_\_\_\_

Type of Construction: \_\_\_\_\_

☐ Vinyl Liner ☐ Gunite ☐ In-Ground ☐ Above-Ground

Type of Filter: ☐ Cartridge ☐ Diatomaceous Earth ☐ Sand ☐ Other

Heated: ☐ Yes ☐ No If so, Type of Heat \_\_\_\_\_

Water Supply: ☐ Municipal ☐ Well \_\_\_\_\_ # of Gallons

Sewer System: ☐ Municipal ☐ Septic

Time required to re-circulate entire contents of pool: \_\_\_\_\_

If DE Filter, Describe collection and disposal of DE: \_\_\_\_\_

Describe method of emptying pool (pool drainage): \_\_\_\_\_

\_\_\_\_\_

Type of fencing (shall not be less than 5 feet in height) \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

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Board of Health permit to construct a private residential swimming pool granted subject to the provisions of the "Millis Board of Health Swimming Pool Regulations".

\_\_\_\_\_

Date of Approval: \_\_\_\_\_ Health Director \_\_\_\_\_

Cc: Building Department