



Town of Southborough

Board of Health

9 Cordaville Road, Lower Level
Southborough, MA 01772-1662

Phone: (508) 481-3013
Fax: (508) 229-2580

SWIMMING POOL CONSTRUCTION PERMIT APPLICATION

COMMERCIAL SIZE

INITIAL FEE \$600

Includes review of plans, consultation with Architects, Engineers, Contractor, etc. and issuance of Permit

ADDITIONAL FEE _____ (For inspections and Change Orders - to be determined)

An additional fee may be required prior to final Board of Health sign-off and pool occupancy. Fee will be calculated based on the number of inspections and re-inspections.

*** REQUIRED PLAN DETIAL:** All facilities (bath house, wash room, toilets, etc.) must show connection to an approved on-site septic system or commercial sewer system. The plan must also show surrounding roads, buildings, walkways, etc.

Applicant Name _____ Owner Agent for Owner

Address _____ Phone _____

Pool Designers Name /Company _____

Address _____

Assessors Map/ Parcel _____

Signature _____ Owner Agent for Owner

Date _____

A check or money order payable to the Town of Southborough in the amount of \$600 must accompany this application if it is to be accepted for review.

FOR OFFICE USE ONLY

Fee _____ Check # _____

Approved Denied Reviewed by _____ Date _____

Notes: _____