

POOL PERMIT APPLICATION

TOWN OF ISLIP BUILDING DIVISION
1 Maniton Court, Islip, NY 11751

PERMIT(S) REQUESTED

Swim/Pool In-ground Above Hot Tub
*4 Ft Safety Fence Required During Construction

IN GROUND SWIMMING POOL

3 COPIES OF SURVEY SHOWING POOL LOCATION

3 COPIES OF CONSTRUCTION PLAN OF POOL (W/DIVING BOARD IF APPLICABLE) SIGNED & SEALED BY ARCHITECT OR ENGINEER

A/G POOL/HOT TUB - 3 COPIES OF SURVEY SHOWING LOCATION **AND** 3 COPIES OF MANUFACTURERS SPECIFICATIONS FOR POOL

APPLICATION NOTARIZED BY PROPERTY OWNER AND LICENSED POOL COMPANY WITH ISLIP TOWN LICENSE NUMBER

PROPERTY OWNER - Tel. _____

Name _____

Address _____

CONTRACTOR - TELE _____

Name _____

Address _____

BOARD OF APPEALS

Granted: _____

Denied: _____

SECRETARY

Name _____
(Print)

(Signature of Property Owner)

Sworn to before me this ____ day ____ of 200__

Notary Public Signature

Office Use Only

0500- _____

Address _____

Post Office _____

Receipt # _____

Base Fee _____

Building _____

Parking Lot _____

Fireplace _____

Front Foot _____

Apron _____

Recreation _____

Eng. Insp. Fee _____

Contr. Comm. Fee _____

TOTAL FEE _____

FINAL SURVEY AND ELECTRICAL CERTIFICATE REQ'D FOR CO REVIEW

ZONING _____ APPROVED _____ DATE _____

APPROVED TO ISSUE _____ DATE _____

SPECIAL CONDITIONS OF PERMIT _____

COMMENTS:

DATE FILED _____ DATE ISSUED _____

By: _____ Expires _____

A permit shall expire one (1) year after the date of issuance. No renewals are allowed on pools or second story decks.

1. SIZE & USE of existing structures _____

2. PROPOSED USE _____

3. DESCRIPTION OF PROPOSED WORK _____

4. FLOOR AREA to be constructed or altered _____ Total sq.feet

5. If MASTER PLAN, Identify: _____

6. SETBACKS: Distance new structure to be from property line after construction.

Front Yard _____ Other Front Yard _____ Rear Yard _____

Side Yard _____ Other Side Yard _____

7. SIZE of property () x () = _____ sq. ft. or _____ Acres.

8. PROPERTY LOCATION Post Office _____

Street _____ Side of Street N S E W

Nearest Cross Street _____ Direction from Cross Street

N S E W

Distance from Cross St _____ ft. If on Corner NE SE NW SW

School District _____

9. Are there any Property Covenants or Conditions of Special Permits which would affect the development of this property? _____ If yes, please attach.

10. Name of Filed Map _____

Lot No. On Filed Map _____

I understand that before a building permit can be issued, adjoining street must meet minimum Town standards or be bonded for same and that a Certificate of Occupancy for work done under this permit will not be issued until road damage caused during construction is repaired or bonded for same. I understand that the Town is relying on the information provided herein, any inaccuracy may cause delay or additional fees. I swear that this application is a true and complete statement of all proposed work on the described premises, that I have in effect all required insurance, including workers compensation insurance, and that I presently possess a valid Suffolk County home improvement license, if applicable. *This permit issuance expressly implies approval by the landowner of inspections required of the premises.

Name _____
(Print)

(Signature of Property Owner)

Name _____
(Print)

(Signature of Town of Islip Pool Installer)

Islip Town Pool Co. License # _____

Sworn to before me this ____ day ____ of 200__

Notary Public Signature