

Important Information

All permit application forms must be printed on legal size paper (8 1/2" x 14"). Reduced size copies (printed on letter paper) are not acceptable because ample room is needed for handwritten notations on the applications by office staff.

Any forms that have a colored background must be printed in color.

Color printouts are necessary because the Division uses a color coding system. Print the following pages in color, on legal size paper.

Sign and have notarized where required.

Applications are not accepted by email.

Town of Greenwich
 DPW, Building Inspection Division
 Town Hall - 101 Field Point Road
 Greenwich, CT 06836-2540
 Phone: 203-622-7754 - Fax: 203-622-7848

OFFICE USE ONLY

PERMIT NO. _____

ISSUE DATE: _____

COMPLETED BY APPLICANT _____

PARCEL ID _____

APPLICATION TO CONSTRUCT OUTDOOR SWIMMING POOL, SPA OR HOT TUB AND REQUIRED SAFETY BARRIER

The undersigned owner or authorized agent applies for a permit to construct an outdoor swimming pool, spa or hot tub in accordance with the laws and ordinances of the State of Connecticut and of the Town of Greenwich and as set forth in the accompanying plans and specifications insofar as the same shall be found not to conflict with the aforesaid State and Town laws, and also for a certificate of occupancy for the use of the pool, spa or hot tub.

OWNERS AND AGENTS

(PLEASE PRINT)

PROPERTY OWNER _____ ADDRESS _____

TENANT / LESSEE _____ ADDRESS _____

AUTHORIZED AGENT / PERMITTEE

[PERSON RESPONSIBLE FOR SUPERVISION OF WORK, COMPLIANCE WITH APPROVED PLANS AND SPECIFICATIONS AND ALL CODES AND ORDINANCES]

NAME [PRINT] _____ ADDRESS _____

CT REGISTRATION NO. _____ PHONE _____

PLANS AND SPECIFICATIONS BY _____ ADDRESS _____

ARCHITECT OR PROF. ENG. _____ CT REG. NO. _____

BUILDING LOCATION

BUILDING ADDRESS _____ on the NORTH SOUTH EAST WEST side

APPROXIMATELY (DISTANCE _____) N S E W FROM THE INTERSECTION WITH _____

SECTION OF TOWN

CENTRAL OUTLYING NO. OUTLYING SO. BYRAM PEMBERWICK GLENVILLE COS COB RIVERSIDE OLD GREENWICH

GENERAL INFORMATION

POOL AREA = _____ DIMENSIONS _____ X _____
 PRIVATE POOL INGROUND RAISED DECK OR PLATFORM
 PUBLIC POOL ABOVE GROUND SURROUNDING POOL

SPA OR HOT TUB RAISED DECK OR PLATFORM
 EQUIPPED WITH AN APPROVED SAFETY COVER SURROUNDING SPA / HOT TUB

ENCLOSURE (SAFETY BARRIER AND ALARMS) SAFETY BARRIER (FENCE):

TYPE OF ENCLOSURE TO BE SUPPLIED:

WIRE WOOD MASONRY / STONE WALL OTHER

IS THE DWELLING OR OTHER STRUCTURE USED AS PART OF THE ENCLOSURE? YES NO

IF YES, CHOOSE ONE OF THE FOLLOWING PER SECTION AG105.2 (9) 2005 CSBC, 2003 IRC

- DOORS EQUIPPED WITH ALARMS
- DOORS EQUIPPED WITH SELF-CLOSING SELF LATCHING DEVICES 54 INCHES ABOVE THE FLOOR
- POOL EQUIPPED WITH A POWER SAFETY COVER (SPECIFICATIONS ON POOL COVER REQUIRED TO BE SUBMITTED)

BUILDING CODE INFORMATION

2005 CT State Building Code Applied

2003 IBC w/2005 CT Supplement and 2009 CT Amend

2003 IRC w/2005 CT Supplement and 2009 CT Amend

Use Group[s] _____

Const. Type _____

Area [Largest Floor] _____ SF

Flood Zone _____

Elevation _____ NGVD

VALUE OF WORK:

PERMIT FEE -

STATE EDUC. FEE -

INVESTIGATION FEE

TOTAL FEE DUE -

Certificate of Occupancy may be withheld until final valuation of work has been established and fee adjusted and paid. Issuance of this permit shall not be construed as a permit to perform any regulated activity on any inland wetlands.

TYPE OF SEWAGE DISPOSAL

Town Sewer Septic System

AMENDMENTS:

OFFICE USE ONLY

BUILDING CODE REVIEW CONDITIONS

- PLAN REVIEW COND. APPLIES
- SITE DRAIN. COND. APPLIES
- LOAD TABLES FOR TRUSS REQ'D
- 20% HC UPGRADE
- SVRS CERTIFICATE REQ'D
- FINAL EVALUATION REQ'D PRIOR TO CO
- PROOF OF FLOOD ELEV. REQ'D PRIOR TO CO
- GFM APP. REQ'D PRIOR TO CO

REVIEWED BY:

- APPROVED FIELD PLAN GIVEN TO BLDR/OWNER
- PERMIT PICKUP REQUESTED
- MAIL PERMIT

Tax Stamp

APPLICATION TO CONSTRUCT OUTDOOR
SWIMMING POOL, SPA OR HOT TUB
AND REQUIRED SAFETY BARRIER

AFFIDAVIT

THE UNDERSIGNED AGENT/PERMITTEE AND PROPERTY OWNER, BEING DULY SWORN, DEPOSES AND SAYS:

1. That he/she is the current owner of premises described on this application for a pool, spa or hot tub and safety barrier permit.
2. That the below said agent/permittee is duly authorized for and on behalf of the owner to execute and complete the attached application.
3. That the work described in this application is duly authorized by the current owner.
4. That the undersigned agent / permittee is hereby designated as the owner's representative with whom the Division of Building Inspection, DPW may deal with in respect to the work under this application.
5. That this authorization shall continue unless revoked by the owner, giving written notice of revocation to the Division of Building Inspection, DPW.
6. That the agent/permittee and owner understands they are responsible for installing a temporary enclosure around the pool prior to commencement of the installation as required by CSBC Sect. AG105.6, or Sect. 3109.6, 2005 CSBC
7. That the agent/permittee and owner understand they are responsible for installing a permanent safety barrier as required by CSBC, Sect. AG105, or Sect. 3109.4 prior to issuance of a Certificate of Occupancy/Compliance and prior to the pool being placed in use.
8. The agent/permittee understands that they are responsible for compliance with the CSBC Sect. AG106, 2003 IRC or Sect. 3109.5, 2003 IBC.
9. That the agent agrees and understands that in accordance with Sections R110-1, 110.1, R113.1, 113.1, CT State Building Code, it is unlawful to permanently supply electrical power to equipment for the purpose of using the pool, spa or hot tub without first obtaining the required Certificate of Occupancy/Compliance from the Division of Building Inspection.
10. That the agent/permittee and owner are aware and understand their responsibilities under Sects. AB106.2.1 and 3109.5.2.1, CSBC, "Fitting Maintenance," that states "Any pool, spa or hot tub with a broken, loose or missing suction outlet cover shall be immediately placed out of service until repairs are completed and approved."

AUTHORIZED AGENT/PERMITTEE NOTARIZED SIGNATURE

CURRENT OWNER NOTARIZED AUTHORIZATION

Dated this _____ day of _____, 20_____

Dated this _____ day of _____, 20_____

Name (print) _____

Name (print) _____

Signature _____

Signature _____

Subscribed and sworn to, before me on this

Subscribed and sworn to, before me on this

_____ day of _____, 20_____

_____ day of _____, 20_____

OFFICE USE ONLY

AMENDMENTS:

CT Reg. No. _____ Date: _____

Name (print) _____

Signature _____

Address _____

Phone No. _____

AMENDMENTS:

CT Reg. No. _____ Date: _____

Name (print) _____

Signature _____

Address _____

Phone No. _____

AMENDMENTS:

CT Reg. No. _____ Date: _____

Name (print) _____

Signature _____

Address _____

Phone No. _____

AMENDMENTS:

NEW OWNER NOTARIZED AUTHORIZATION

Name (print) _____

Signature _____

Subscribed and sworn to, before me on this

_____ day of _____, 20_____

Notary Public signature _____

AMENDMENTS:

NEW OWNER NOTARIZED AUTHORIZATION

Name (print) _____

Signature _____

Subscribed and sworn to, before me on this

_____ day of _____, 20_____

Notary Public signature _____