

**TOWN OF MORRISTOWN  
SWIMMING POOL/SPA/HOT TUB PERMIT APPLICATION**

Date Submitted: \_\_\_\_\_ Tax Map #: \_\_\_\_\_ Permit number: \_\_\_\_\_  
Date Approved: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Date Permit Paid: \_\_\_\_\_  
ZBA or PB Approval: \_\_\_\_\_ Valuation: \$ \_\_\_\_\_ Bldg Permit Fee: \_\_\_\_\_

**Project/Site Information**

Address of Project: \_\_\_\_\_  
Tax I.D. Number: \_\_\_\_\_  
Zoning Classification: \_\_\_\_\_

**Owner Information**

Name(s): \_\_\_\_\_  
Address (if different than project location): \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone Number(s): \_\_\_\_\_

**Contractor Information**

Company: \_\_\_\_\_ Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Office Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

**Contractor's Liability and Workman's Compensation Insurances required to be on file prior to issuance of permit**

**Please Contact: ( ) Homeowner ( ) Contractor With Questions**

## Required Documentation

**Survey Map** Showing Location of Pool, Hot Tub/Spa (Fence, Pool Heater if Applicable)

**AND**

Manufacture/Retailer Information Sheet or Pamphlet showing compliance standards in which the Pool, Hot Tub/Spa (Fence, Door Alarm, Pool Alarm if applicable) is/are to be constructed/installed

## Project Information

**Type of Pool:** ( ) Outdoor ( ) Indoor ( ) Above Ground ( ) In-Ground ( ) Inflatable ( ) Hot Tub/Spa

Pool Size (Diameter): \_\_\_\_\_ Oval/Rectangle: \_\_\_\_\_ Pool Depth: \_\_\_\_\_

Barrier Type # 1: \_\_\_\_\_ Description: \_\_\_\_\_  
eg. 6' high wood fence with self closing / locking gate

Barrier Type # 2: \_\_\_\_\_ Description: \_\_\_\_\_  
eg. Deck gate with self closing / latching hardware

Barrier Type # 3: \_\_\_\_\_ Description: \_\_\_\_\_  
eg. House wall with alarm on sliding glass door

**Barrier Types:** Pool Wall (48" Minimum)      Deck/Deck Gate  
Fence (48" Minimum)                      Locking Safety Cover  
House/Structure Wall                      Other

*Note – All Barrier Types Have Code Specific Requirements*

*I hereby certify that all work related to this application will be performed in accordance with all Applicable town, and state laws and codes pertaining to building construction, and demolition and the information submitted and contained herein is accurate and correct. I further certify that I am the owner or an authorized agent of the property owner listed in this application, and have the authority to make application for work to be performed.*

Applicants Name (Printed): \_\_\_\_\_

Applicants Signature: \_\_\_\_\_



---

**FOR USE BY CODE ENFORCEMENT OFFICER ONLY.**

Permit for use

Approved

Denied – Not in conformance with the following provision(s) of the Town of Morristown Zoning

Ordinance: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Denied – Does not meet New York State Fire Prevention and Building Codes.

Comments: \_\_\_\_\_

\_\_\_\_\_

---

Date: \_\_\_\_\_ By: \_\_\_\_\_

