



**WRENTHAM
BOARD OF HEALTH**
79 South Street, Wrentham, MA. 02093
APPLICATION FOR RESIDENTIAL POOL
This is not a construction permit

Date Received:	Application Number:	Fee:
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Homeowner Name:	
Address:	
Address where pool will be built: <i>(if different)</i>	
Telephone Number:	Email Address:

All applications must include a copy of the septic system as-built with the exact location of the pool drawn in, including the distances from the septic components.

CONTRACTOR AND POOL INFORMATION		
Name of Contractor:		
Address of Contractor:		
Telephone number:	Fax:	Email:
Type of Pool:	<input type="checkbox"/> Above Ground <input type="checkbox"/> In-Ground	
Volume:	Source of Water:	
Dimensions: <i>(length, width, circular)</i>		

All applications must include a copy of the septic system as-built with the exact location of the pool drawn in, including the distances from the septic components.

Specifications and the attached plan meet the requirements of the Wrentham Board of Health

Signature of Board of Health Agent

Date

A copy of this approval will be submitted to the Wrentham Building Department. The Board of Health fee covers the application and the plan review by the Board of Health, and does not include the fees for permit(s) issued by the Wrentham Building Department. The Wrentham Building Department will issue the construction permit for this pool.