



**BUILDING DEPARTMENT**  
**Town of Coeymans**  
**18 Russell Avenue**  
**Ravena, New York 12143**  
**Tel. (518) 756-2850**

Edward P. Downes  
 Building Inspector  
 C.E.O.

Sante DeBacco  
 Assistant Building  
 Inspector  
 C.E.O.

Mary Ann Filkins  
 Secretary

**SWIMMING POOL APPLICATION**

**A PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK**

Applicants Name:	Date of Application
Address:	Application Number
Phone Number:	Zoning District
Installer	Fee
Address	

Phone Number \_\_\_\_\_ Estimated Cost \_\_\_\_\_  
 This application is to be submitted in DUPLICATE Please answer all questions. The undersigned hereby applies for a permit to do the following work in accordance with the description, plans and the New York State Uniform Fire Prevention and Building Code.

Description" \_\_\_\_\_  
 Dimensions: \_\_\_\_\_ Max. Depth: \_\_\_\_\_  
 Masonry ( ) Metal ( ) Other: ( ) \_\_\_\_\_  
 Capacity" \_\_\_\_\_ Gal \_\_\_\_\_ In-Ground ( ) Above Ground: ( ) \_\_\_\_\_  
 If above ground, height and above surrounding grade \_\_\_\_\_  
 Fence: (Enclosure must completely surround pool) \_\_\_\_\_  
 Height: \_\_\_\_\_ If aboveground, will there be a deck? \_\_\_\_\_  
 Type of gate: \_\_\_\_\_ Lock: \_\_\_\_\_  
 Will the fence be erected before pool is filled? \_\_\_\_\_  
 Filter and pump: \_\_\_\_\_  
 Type of filter: \_\_\_\_\_ Capacity: \_\_\_\_\_  
 Time for pump to completely re-circulate pool water: \_\_\_\_\_

Signature: \_\_\_\_\_  
 Date \_\_\_\_\_

This application must be accompanied by a plot plan showing lot dimensions; present, building locations, and proposed location of pool.  
 Percentage of lot to be covered: \_\_\_\_\_  
 Pool location meets sire lot setback for zoning district ( ) Yes ( ) No  
 Approved ( ) Disapproved ( ) Remarks \_\_\_\_\_  
 Date Approved \_\_\_\_\_ Signature: \_\_\_\_\_ Building Inspector \_\_\_\_\_