



Town of Fairhaven  
 Board of Health  
 40 Center Street  
 Fairhaven, Ma 02719

**SWIMMING POOL APPLICATION**  
**Private**

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

Application is hereby made for a permit to maintain a residential swimming pool according to the minimum standards for swimming pools as set forth in the Rules & Regulations of the Fairhaven Board of Health, Chapter XI, adopted October 1, 1979 and as amended from time to time. Minimum setbacks are ten (10) feet from any property line and twenty (20) feet from any sewage disposal facility. A four (4) foot fence is required for in-ground pools. A locking gate or other safety mechanism which renders the pool inaccessible to children is required. All pools shall provide filtration and disinfection to maintain the quality of pool water for swimming. A site plan showing all property lines, all structures on the property and the exact location of the proposed pool with the above stipulated setbacks is required with this application.

Applicant/Company: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Homeowner: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address of Pool Location: \_\_\_\_\_ Septic or Sewer: \_\_\_\_\_

Above-Ground \_\_\_\_\_ Dimensions \_\_\_\_\_ In-Ground \_\_\_\_\_ Dimensions \_\_\_\_\_

Source of Pool Water: \_\_\_\_\_ # of Gallons \_\_\_\_\_ Deck Attached \_\_\_\_\_

Type of Pool Filter: \_\_\_\_\_ Disinfection Method: \_\_\_\_\_

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**BOARD OF HEALTH TO COMPLETE**

Date of Inspection/Review: \_\_\_\_\_ Inspector: \_\_\_\_\_

Variance Required? Yes  No  Date of Board Action if Required: \_\_\_\_\_

Board Action Taken: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_ Permit #: \_\_\_\_\_

Fee Paid: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Please be aware that other regulations may apply: Zoning By-Laws, Building Code, Electrical, etc

