

## Town of Hadley

## Board of Health

100 Middle Street

Hadley, Ma. 01035

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## Application for a Permit to Operate a Swimming Pool, Hot Tub, or Spa

All applications must be filled out completely and legibly.

Application is hereby made for a permit to operate a public or semi-public swimming pool, wading pool, hot tub, or spa. Signing this permit certifies that the applicant will operate the pool according to 105 CMR 435.000 Minimum Standards for Swimming Pools (State Sanitary Code, Chapter V). The fee for this permit is payable upon application. A separate application and fee must be filed for each pool, spa, or hot tub.

| New License              | Renewal             |                      | Swimming Pool |             | _ Hot Tub _  | -              |
|--------------------------|---------------------|----------------------|---------------|-------------|--------------|----------------|
| Seasonal                 | Year Round          |                      |               |             | Dates Open   |                |
| Owner                    |                     |                      | Telep         | ohone#_     |              |                |
| Pool Location            |                     |                      |               | A           |              |                |
| Pool Operator            |                     |                      | Telep         | ohone#      |              |                |
| Date of Certification    |                     |                      |               |             |              |                |
| (Include a copy of the c | ertification; no pe | rmits will be issue  | ed unless the | pool has a  | Certified Po | ool Operator.) |
|                          |                     | Pool Informa         | ation         |             |              |                |
| Description: Length      | ft.                 | Width                | ft.           | Volume      |              | _ gallons      |
| Swimming Area            |                     |                      |               |             |              |                |
| Diving Area              |                     |                      | F             | persons (43 | 35.027)      |                |
| Number of Skimmers       |                     |                      |               |             |              |                |
| Decking: Type            |                     | Width                | feet          | Fence F     | leight       | ft.            |
| Water Source             | Sew                 | age/Wastewater I     | Disposal      |             |              |                |
|                          |                     | Filtration Sy        |               |             |              |                |
| Type of Filters          |                     | Total Filter Are     | ea            | sq. ft.     |              |                |
| Circulation Rate         | gpm                 | Backwash Rat         | te            | gpm         |              |                |
| Turnover in Hours        |                     | Rate in Hours        |               | _           |              |                |
|                          |                     | Disinfection S       | System        |             |              |                |
| Type of Chlorinator      |                     | Capacity             |               | gallons     | or tablets.  |                |
|                          | Add                 | litional Information | n / Commen    | ts          |              |                |
|                          |                     |                      |               |             |              |                |
|                          |                     |                      |               |             |              |                |