

**Swimming Pool  
PERMIT APPLICATION  
Village of Ellenville  
2 Elting Court  
Ellenville, NY 12428  
845.647.7080**

Permit No. \_\_\_\_\_

Fee: \$50.00

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

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

**INSTRUCTIONS**

- a. This application must be completely filled in by typewriter or in ink and submitted to the Village of Ellenville Building Department.
- b. Survey showing location of lot and buildings on premises, giving a detail description of the property areas the pool will be installed.
- c. This application must be accompanied by two (2) sets of specifications, i.e., height and style/type and material pool is made of.
- d. The work covered by this application may **NOT** be commenced before issuance of pool permit.
- e. Upon approval of this application, the Building Department will issue a pool permit to the applicant together with approved, duplicate set of plans and specifications. The permit shall be displayed on the premises, available for inspection throughout the progress of work.

Manufacturer's information on size and shape of pool. Details for pool enclosures and or decks.

**Use of pool is prohibited until the issuance of underwriter's certificate and final Certificate of Compliance.**

Electrical Requirements

Provide a power source to the pool filter and provide proper pool grounding and bonding as per the National Electrical Code and New York State Building, Fire and Residential Code.

**Property**

**Location:** \_\_\_\_\_

**(Give street number and name)**

State whether applicant is owner, lessee, agent, architect, engineer or builder: \_\_\_\_\_

**ESTIMATED COST AND FEES**

Fees

Pool Permit: **\$50.00** Estimated Cost: \_\_\_\_\_

Name of contractors Compensation Insurance Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_

**IDENTIFICATION-To be completed by all applicants**

Name (please print)	Mailing Address Number, Street, City, State	Telephone
1. Owners Name		
2. Contractors Name		

STATE OF NEW YORK,  
COUNTY OF ULSTER

\_\_\_\_\_ being duly sworn deposes and says that he is the applicant above named. (Name of individual signing application-please print)

He/she is the \_\_\_\_\_  
(Owner, Contractor, Agent, Corporate Officer, ect.)

of said owner or owners, and is duly authorized to perform the said work and to make and file this application; that all statements contained in this application are true to the best of his/her knowledge and belief, and the work will be performed in the manner set forth in the application and in the plans and specifications filed therewith.

Sworn to before me

this \_\_\_\_\_ Day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
(Signature of applicant)

\_\_\_\_\_  
Notary Public  
Ulster County