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Public Health
Prevent. Promote. Protect.

**APPLICATION FOR A PERMIT TO OPERATE A SWIMMING POOL OR
SPECIAL PURPOSE POOL**

FEE: \$100.00/Pool; \$50.00/Special Purpose Pool (Wading, Hot Tub)

Application is hereby made for a permit to operate a public, semi-public or wading pool.
This pool is to be operated according to the minimum standards for swimming pools set
forth in Article VI of the Sanitary Code of the Commonwealth of Massachusetts.

OWNER _____ TEL. NO. _____

LOCATION _____

TYPE OF POOL _____ LENGTH _____ WIDTH _____ VOLUME _____
(a detailed plan must be filed with original application)

SIZE: SWIMMING AREA _____ NON SWIMMING AREA _____ DIVING AREA _____

SOURCE OF WATER _____ FLOW RATE, gpm _____

TIME FOR TURNOVER _____

DECK: TYPE AND WIDTH _____

CHEMICAL TREATMENT _____ AUTO _____ MANUAL _____

DATES OF OPERATION _____
(Method, type, capacity, quantity etc.)

CERTIFIED POOL OPERATORS NAME _____

NUMBER OF LIFEGUARDS _____ BATHER LOAD _____

Pursuant to M.G.L. Ch.62C, sec. 49A, I certify under the penalties of perjury that I, to the best of my
knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Social Security # or Federal Identification #

Signature of Individual or Corporate Name

DATE _____

Corporate Officer (if applicable)

E-Mail Address