

INC. VILLAGE OF BAYVILLE
BUILDING DEPARTMENT
34 SCHOOL STREET
BAYVILLE, NY 11709
TELEPHONE: 516-628-1247

FEE:\$ _____

Receipt #: _____

SWIMMING POOL & HOT TUB PERMIT APPLICATION

TYPE OF POOL: Inground ___ Aboveground ___ Semi-aboveground ___ Hot Tub ___

OWNER'S NAME _____ CONTACT PHONE _____

HOME ADDRESS _____

SITE ADDRESS _____

SECTION _____ BLOCK _____ LOT(S) _____ DISTRICT _____ FLOOD ZONE** _____

MUST PROVIDE THE FOLLOWING:

- 2 COPIES OF CURRENT SURVEY SHOWING ALL EXISTING STRUCTURES, MARKED WITH PROPOSED POOL/HOT TUB LOCATION, FENCING, DIMENSIONS, AND SETBACKS
 - NASSAU COUNTY ASSESSOR'S FORM
- FULL DESCRIPTION OF PROPOSED POOL, INCLUDING CONSTRUCTION TYPE AND SIZE
 - INDICATE CORNER OR INTERIOR LOT
 - DRYWELL APPLICATION FOR DISPOSAL OF POOL WATER (NOT PERMITTED IN STREET), OR SIGNED AFFIDAVIT OF PLAN FOR DISPOSAL OF POOL WATER
 - PROOF OF ANNUAL BACKFLOW TEST REPORT
(applicant must submit copies to Water and Building Departments)
 - PSEG POOL/HOT TUB CLEARANCE APPROVAL
(only when overhead utility lines are present in the yard)
<https://www.psegliny.com/buildingrenovationservices/poolclearancerequest> OR CALL [844-341-63780](tel:844-341-63780)
 - POOL/HOT TUB ALARM AFFIDAVIT
 - "CALL BEFORE YOU DIG" AFFIDAVIT

FOR DURATION OF WORK, MUST PROVIDE 6' FENCING WITH TOP AND BOTTOM RAILS, AND POSTS NO MORE THAN 8' ON CENTER TO ENCLOSE ANY EXCAVATION

OWNER/AGENT SIGNATURE _____ DATE _____

CONTACT THE BUILDING DEPARTMENT FOR INSPECTION WHEN INSTALLED

APPROVED _____ DATE INSPECTED _____