

**SWIMMING POOL PERMIT**

Application fee: \$100.00

Make check payable to: **Town of Pembroke**

The Commonwealth of Massachusetts  
Town of Pembroke

**APPLICATION FOR PERMIT**

Do not write in this space.

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

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

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

To the Licensing Authorities:

In accordance with the provisions of the Statutes relating thereto, application for a Permit is hereby made by (***please print clearly***)

Name: \_\_\_\_\_  
(Full name of applicant)

Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_  
(# Street) (State) (Zip)

Telephone: (\_\_\_\_\_) \_\_\_\_\_

Type of pool: Public \_\_\_\_\_ Semi-Public \_\_\_\_\_ Special Use \_\_\_\_\_

Pool operator: \_\_\_\_\_

Method of water treatment: \_\_\_\_\_

Bather load capacity: \_\_\_\_\_ Gallon capacity: \_\_\_\_\_

Water Source: Private well: \_\_\_\_\_ Town Water: \_\_\_\_\_ Trucked in: \_\_\_\_\_

Number of on-duty Lifeguards per shift: \_\_\_\_\_

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

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Telephone)