

TOWN OF DIX BUILDING CODES AND ZONING

Office 304 7th Street, Watkins Glen, NY. 14891

David Patterson Code Enforcement Office: 607-535-7973 ext. 205

---- Fax: 607-535-2590 ---- Cell: 607-425-6351

SWIMMING POOL INSTALLATION PERMIT

Applicants name _____
Address _____

Phone numbers, at home _____ cell _____ at work _____

Property owners name _____ Phone _____
Address _____

Name of person responsible for supervision & maintenance of the pool _____
Address _____ Phone _____

The pool sides will be (CHECK ONE) ___ Soft sided air inflated ___ OR ___ Rigidly supported ___
with metal or columns and top rail.

Pool height _____ pool width _____

Address where pool will be located _____

Installers name _____ Phone _____

Address _____

Before you dig or insert stakes or similar items into the ground contact

DIG SAFELY NEW YORK AT 1-800-962-7962

PERMIT APPLICANT: (PRINT NAME) I _____ affirm
under

Penalty of law that I am authorized to make this application. And that all statements made by me
are on this application are true.

Applicants signature _____ **Date** _____