Towamencin Township

1090 Troxel Rd, Lansdale, PA 19446 Phone: (215) 368-7602 Fax: (215) 368-7650 permits@towamencin.org

Above Ground Pool Application

This application is for any above ground pool, whether permanent or seasonal/temporary (Seasonal/temporary pool is a pool installed between April 1 and September 30 and removed from the site annually)

Date:				
Applicant Name:				
Applicant Phone No.:	E-Mail:			
Property Owner's Name:				
Size of Pool: Length: W	Vidth:	Height of Side	Walls:	Gallons:
** * *	elect one) Steel Aluminum Inflatable PVC Hot Tub (attach specs showing locking cover) Other (Please explain)			
Does the pool have electrical/pump? ☐ Yes ☐ No **A separate Electrical Permit is required for all new electric to be installed** ALL NEC 2014 grounding and bonding are required for existing and new electric.				
Is the pool equipment	□ New	□ Old (How o	old:)
Will the ground/slope be modified for the pool? ☐ Yes ☐ No (If yes, please explain				
Does the property have a	an existing fence?	☐ Yes	□ No	Existing fence height:
Type of pool ladder:	Removable	☐ Locking La	dder	
Applicant Acknowledgement Section: Read the statements below, initial on the line and complete:				
I have read and reviewed the included and attached regulations regarding Above Ground Pools and agree to comply with the attached regulations. I further understand that I am responsible for complying with all applicable federal, state, and local laws and regulations.				
I understand that this registration will be renewable annually.				
I am a renter and have attached a letter from the property owner granting permission for seasonal/temporary pool installation on the property.				
Applicant Signature:				Date:
For Office Use Only				
Zoning Approval:				
Permit Fee: \$	Check #:			Date Approved: