



APPLICATION FOR ZONING PERMIT SWIMMING POOLS

Date _____

Application No. _____

Above ground swimming pool _____ **or** **In-ground swimming pool** _____

Size of swimming pool: _____ **Size of deck:** _____

Location of property: _____ Zoning District: _____

Name of owner: _____

Address: _____ Phone No: _____

Do you have: well _____ public water _____ septic _____ public sewer _____

I hereby agree to conform to all requirements of the Laws of the State of Connecticut and the Ordinances and Regulations of the Town of Thomaston, and to notify the Land Use Office of any alteration in the plans for which this permit is being asked. I furthermore agree the above described pool is to be located at the proper distance from all property and street lines as required by the Zoning Regulations or any other applicable local and state ordinances and regulations and it is understood that the pool upon completion will be used in compliance with the Zoning Regulations of the Town of Thomaston.

I hereby apply for a Zoning Permit for the use of property as described in the above application for a permit pursuant to Section 4.5 Schedule A Part D.3 and Section 5.8 of the Zoning Regulations of the Town of Thomaston.

Signed _____
OWNER OR AGENT

Address _____ Phone No. _____

(OFFICE USE ONLY)

Existing lot coverage _____ Proposed lot coverage _____

Fee paid: \$ _____ Received by: _____ Check# _____ Cash _____

**Permission is hereby granted to the undertake the use as listed above.
Zoning Commission, Town of Thomaston, CT**

Zoning Agent

Denied by Zoning Agent _____

Reason _____