



WESTPORT WESTON HEALTH DISTRICT
 180 Bayberry Lane, Westport, CT 06880-2855
 Telephone: (203) 227-9571

Non-Refundable Fee:
 Approval Valid for One Year

Fee: Swimming Pool on Septic \$255.00
 Swimming Pool on Sewer \$165.00
 Hot Tub \$110.00

**INSTRUCTIONS FOR COMPLETING AN APPLICATION
 TO CONSTRUCT A SWIMMING POOL/SPA**

- A. Please complete one (1) copy of the application form.
- B. Attach the following to the application:
 - 1. Two (2) copies current (A2) survey drawn to scale showing North direction with an arrow, and less than 10 years old. Survey must show all existing structures and additions on property.
 - a. Location and size of septic tank,
 - b. Location and size of leaching area,
 - c. Well, if applicable,
 - d. Water course or wetland area,
 - e. Other permanent buildings or structures,
 - f. Easements for other utilities or other purposes,
 - g. Proposed location of pool.
 - h. Plans detailing pool's construction.
 - 2. Provision for the disposal of backwash effluent.
 - 3. Location of point of discharge of draining wastewater, if applicable.
 - 4. A letter of authorization must accompany application.
 - 5. Check payable to ***Westport Weston Health District***.
- C. Upon completion and submission of above, an appointment will be scheduled with a sanitarian for review, if necessary.

NOTICE

All plans for building enlargement, swimming pool installation, sewage system alterations, etc., must show the location and size of the septic tank. If not available from previous records, the size and location are to be determined by measurement by a Sanitarian of the Westport Weston Health District.

To obtain the size of the tank, the cover top corners are to be exposed for measurement of length and width, and the manhole cover removed to measure the depth.

A statement as to size from a septic tank pumping firm will not be accepted.

If a public sanitary sewer is available for connection at the site, the Westport Weston Health District may require that a connection be made before any approvals are granted. *Westport Weston Sanitary Code*, Section 3.3 (f) and (g).



APPLICATION FOR REVIEW OF PLANS FOR PROPOSED SWIMMING POOL/SPA

Please TYPE or PRINT. Complete all items to bold line. Two copies of plot plan must be submitted with this application.

Location: _____ Westport Weston
Street Address Lot Number

Owner: _____ Address: _____ Tel: (____) _____

Built By: _____ Address: _____ Tel: (____) _____

Type of Pool: _____

Size of Pool: _____

Distance of Pool From:

Dwelling: _____ Water Course/Wetlands _____

Septic Tank: _____ Leaching Area: _____

Well: _____

Drinking Water Supply: Public Private

Pool Filter:

Type: _____ Size: _____

Location (*Show on plan*): _____

Source of water: _____

Location of draining wastewater discharge, if applicable: _____

Brief Description of Application: _____

Has any soil testing been performed on the property? Yes No

If yes, when and by whom? _____

Signed: _____
Owner or Duly Authorized Representative Date

WWHD REMARKS:

- Compliance with 19-13-B100a required..... Yes No
- Soils evaluation required Yes No
- SSDS proposal required..... Yes No
- Permit to Construct required (if accessory structures proposed) Yes No
- Surveyors as-built required..... Yes No

Conditions: _____

APPROVAL: Approved: _____ Date: _____

FINAL WWHD INSPECTION REQUIRED AT COMPLETION OF JOB Yes No

It is the responsibility of the contractor or homeowner to arrange for final inspection.

Final Inspection

Final Inspection/Final Approval: _____
Sanitarian Date

Remarks: _____

