



**TOWN OF WILBRAHAM
BOARD OF HEALTH
240 Springfield St
Wilbraham, MA 01095**

**APPLICATION FOR PERMIT TO OPERATE A
SEMI-PUBLIC SWIMMING, WADING, OR
SPECIAL PURPOSE POOL**

FEE: \$50 Annual

SECTION 1

1. Operator of the Pool. _____
2. Operator's Phone Number _____ and Email Address _____
3. Location of the Pool. _____
4. Swimming Pool _____ Wading Pool _____ Special Purpose Pool _____
5. Method of Water Treatment. Chlorine _____ Special Purpose Pool _____
6. Number of Certified Lifeguards required by the Wilbraham Board of Health _____
7. Maximum number of people allowed in the water at any time.
(15sq. ft. per person) _____
8. Type of Emergency Communication System located at each pool, available at all times.

9. Phone numbers of Emergency Medical Services, Local and State Police, and Fire Department.

I hereby certify that the operator indicated above is thoroughly familiar with CHAPTER V (Minimum Standards for Swimming Pools) of the Sanitary Code of the Commonwealth of Massachusetts 105 CMR 435.000.

NAME: _____ TITLE: _____

DATE: _____

SECTION II

SAFETY REQUIREMENTS:

Shepherd's crook or pole to extend greater than 16 feet per 2,000 square feet of water _____

Ring buoy with rope (1-1/2 times width of pool) _____

First aid kit as described in 105 CMR 435.25 _____

Written record of daily attendance, results of chemical tests, dates and times of emptying, cleaning, and backwashing of pool. _____

Sign at entrance to pool requiring a shower before entering pool and forbidding any person with communicable disease to enter pool. _____

Drinking water facilities. _____

SECTION II – CONT.
SAFETY REQUIREMENTS:

Water depth markings on pool deck and vertical pool walls. _____

Polyethylene line (or equal) to separate non-swimmers from deeper water. _____

Emergency communication system available at pool at all times with instructions on how to use system.

Test kits: Free Chlorine _____ Combined Chlorine _____ OR Bromine _____

PH _____ Total Alkalinity _____ Calcium Hardness _____

NOTE: If no lifeguards are required by the Board of Health, a warning sign shall be posted in a conspicuous location and shall state “**WARNING-NO LIFEGUARD ON DUTY**” in easy to read, legible letters which are at least 4 inches (10cm) high. In addition, there shall be signs which are readily visible stating “**CHILDREN UNDER AGE SIXTEEN SHOULD NOT USE SWIMMING POOL WITHOUT AN ADULT IN ATTENDANCE**” AND “**ADULTS SHOULD NOT SWIM ALONE.**”

LIFEGUARDS (If required by the Board of Health)

TO BE PRESENT AT POOL AT ALL TIMES WHILE POOL IS OPEN

At least sixteen years of age _____

Certified as described in 105 CMR 435.23 _____ Standard First Aid _____ CPR _____

Red or Bright Orange bathing Suit _____ Orange Hat or Sun Helmet _____

Sun block or other skin protection _____ Whistle, Bull Horn, or other Voice Amplification _____

One Rescue Tube at each Lifeguard Station _____ A backboard with straps _____

CPO Name _____ Date of Certification _____

Certification Number _____