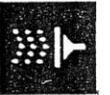


New Garden Township Swimming Pool Permit Application Instructions

1. The applicant is to complete Sections I, II, III, IV, VI and VII of the permit application.
2. The applicant is to complete sections A., B., C. and D of the Building, Plumbing, Mechanical and Electrical permits.
3. Submit two site plans prepared by a PA. registered surveyor or engineer drawn to scale of the property with the following information;
 - a. Zoning District classification.
 - b. Metes and bounds with north arrow.
 - c. Lot size in square feet.
 - d. Size and location of existing and proposed buildings and structures including pool equipment.
 - e. Distances from pool and equipment to property lines and other buildings and structures. (Measured from edge of decking).
 - f. Place the total impervious surface lot coverage on the plan in square feet and percent. Include all structures, buildings, pools, pavers, stone and gravel and anything other than dirt and grass.
 - g. Existing and proposed contour lines, drainage swales, etc.
 - h. Proposed storm water and erosion controls.
 - i. Any streams, ponds, wetlands, Flood Hazard Zones, rock out-cropping, wells and on site sewage systems.
 - J. Location of proposed pool barrier.
4. Submit two sets of pool construction specifications, construction drawings and cross sections prepared by a PA registered design professional. Include all pool equipment.
5. Submit copy of the pool barrier details including fences, latching devices, door alarms, etc.
6. The applicant is to sign the Required Inspection forms and return with the permit application.
7. ALL contractors including sub-contractors are required to be currently registered to work within New Garden Township.

PLUMBING SUBCODE TECHNICAL SECTION



Date Received _____
Date Issued _____
Control # _____
Permit # _____

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION, WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Block _____ Lot _____
Work Site Location _____
Owner in Fee _____
Address _____
Tele. (_____) _____
Contractor _____
Address _____
Tele. (_____) _____ Fax (_____) _____
Lic. No. _____
Federal Emp. No. _____

D. TECHNICAL SITE DATA (List of all fixtures.)

NO. _____
FIXTURE/EQUIPMENT _____
Water Closet _____
Urinal/Bidet _____
Bath Tub _____
Lavatory _____
Shower _____
Floor Drain _____
Sink _____
Dishwasher _____
Drinking Fountain _____
Washing Machine _____
Hose Bibb _____
Water Heater _____
Fuel Oil Piping _____
Gas Piping _____
Steam Boiler _____
Hot Water Boiler _____
Sewer Pump _____
Interceptor/Separator _____
Backflow Preventer _____
Greasetrap _____
Sewer Connection _____
Water Service Connection _____
Stacks _____
Other _____
Other _____
Other _____

B. PLUMBING CHARACTERISTICS

Use Group Present _____ Proposed _____
Building Sewer Size _____ Public Sewer _____ Private Septic _____
Water Service Size _____ Public Water _____ Private Well _____
Est. Cost of Plumbing Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW	INSPECTIONS	Type:	Failure	Failure	Approval	Initial
<input type="checkbox"/> No Plans Required		Slab	_____	_____	_____	_____
Joint Plan Review Required:		Rough	_____	_____	_____	_____
<input type="checkbox"/> Building <input type="checkbox"/> Electric		Water	_____	_____	_____	_____
<input type="checkbox"/> Fire <input type="checkbox"/> Elevator		Sewer	_____	_____	_____	_____
<input type="checkbox"/> Plumbing Plans Approved		Fixtures	_____	_____	_____	_____
Date: _____		Gas Equipment	_____	_____	_____	_____
Approved by: _____		Gas Piping	_____	_____	_____	_____
SUBCODE APPROVAL		Solar	_____	_____	_____	_____
<input type="checkbox"/> CO <input type="checkbox"/> CCC <input type="checkbox"/> CA		TCO	_____	_____	_____	_____
Date: _____			_____	_____	_____	_____
Approved by: _____			_____	_____	_____	_____

C. CERTIFICATION IN LIEU OF OATH

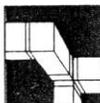
I hereby certify that I am the (agent of) owner of record and am authorized to make this application and perform the work listed on this application.

Signature — Contractor's Seal _____

Licensed Plumbing Contractor Exempt Applicant

Administrative Surcharge	\$ _____
Minimum Fee	\$ _____
Fee	\$ _____
TOTAL FEE	\$ _____

MECHANICAL INSPECTOR TECHNICAL SECTION



Date Received _____
Date Issued _____
Control # _____
Permit # _____

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE.

Block _____ No. _____ Lot _____
 Work Site Location _____
 Owner In Fee _____
 Address _____
 Tele. (_____) _____
 Contractor _____
 Address _____
 Tele. (_____) _____ Fax (_____) _____
 Lic. No. _____
 Federal Emp. No. _____

B. MECHANICAL CHARACTERISTICS

Use Group R-3/R-4
 Heating System Conversion Replacement
 Fuel: Gas Oil Electric Solar
 Other _____
 Type: Hydronic Hot Air
 Estimated Cost of Mechanical Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW:	INSPECTIONS	DATES			
Type:	Type:	Failure	Failure	Approval	Initial
<input type="checkbox"/> No Plans Required	Gas Piping	_____	_____	_____	_____
<input type="checkbox"/> Joint Plan Review Required	Appliance	_____	_____	_____	_____
<input type="checkbox"/> Bldg. <input type="checkbox"/> Plumb.	Chimney/Vent	_____	_____	_____	_____
<input type="checkbox"/> Elec. <input type="checkbox"/> Elevator	Oil Piping	_____	_____	_____	_____
<input type="checkbox"/> Fire <input type="checkbox"/> Mech.	Oil Tank	_____	_____	_____	_____
PLANS APPROVED	LPG Tank	_____	_____	_____	_____
Date: _____	Hydronic Piping	_____	_____	_____	_____
Approved by: _____	Fireplace	_____	_____	_____	_____
SUBCODE APPROVAL	Chimney Cert.	_____	_____	_____	_____
<input type="checkbox"/> CA <input type="checkbox"/> CCO	Other _____	_____	_____	_____	_____
Date: _____					
Approved by: _____					

C. CERTIFICATION IN LIEU OF OATH
 I hereby certify that I am the (agent of) owner of
 record and am authorized to make this application.

Signature _____

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

NO.

FIXTURE/EQUIPMENT

_____	Water Heater	_____
_____	Fuel Oil Piping	_____
_____	Gas Piping	_____
_____	Steam Boiler	_____
_____	Hot Water Boiler	_____
_____	Hot Air Furnace	_____
_____	Oil Tank	_____
_____	LPG Tank	_____
_____	Fireplace	_____
_____	Other	_____

FEE (Office Use Only)

_____	Administrative Surcharge	\$ _____
_____	Minimum Fee	\$ _____
_____	TOTAL FEE	\$ _____

Phone: (610) 268-2915
Fax: (610) 268-0458



E-Mail: office@newgarden.org
Website: www.newgarden.org

New Garden Township

BOARD OF SUPERVISORS
299 STARR ROAD
LANDENBERG, PENNSYLVANIA 19350

SWIMMING POOL INSPECTIONS

The issuance of this building permit requires you to comply with all provisions set forth in the New Garden Township Building Code and Zoning Ordinance. Listed below are the stages of construction when the New Garden Township Building Official must be notified. Inspections must be scheduled a minimum of twenty-four (24) hours in advance by calling **1-800-732-2551**. Please leave your name, phone number, permit number and the type of inspection requested. Site inspections are to be scheduled with the New Garden Township Zoning Officer at **610-268-2915 extension 103**.

ABOVEGROUND SITE INSPECTION – This inspection will be made prior to installation of the pool. The pool location and property lines are to be marked to determine zoning setbacks.

ABOVEGROUND FINAL- Inspection will be made upon completion of pool prior to using the pool. A Final electrical inspection by an approved third party inspection agency is required prior to this inspection and approval must be posted on site.

INGROUND POOLS

SITE INSPECTION – This inspection will be made prior to excavation of the pool. The pool and all appurtenances must be laid out and the property lines marked to determine zoning setback compliance. Setbacks are measured from the edge of decking. This inspection is to be scheduled with the New Garden Township Zoning Officer at **610-268-2915 extension 103**. Minimum one working day notice is required.

CONTINUED ON REVERSE SIDE OF FORM

STEEL INSPECTION – This inspection will be made upon completion of steel reinforcement. A Bonding inspection is required at this time by an approved third party inspection agency posted on the job site.

FINAL INSPECTION - This inspection will be made upon completion of the pool and all equipment and required pool barriers. A Final electrical inspection by an approved third party inspection agency is required prior to this inspection. Approval must be posted on the job site.

Any changes or revisions to the approved plans must be approved by the Building Official prior to commencement of such changes or revisions.

SWIMMING POOLS SHALL NOT BE FILLED WITH WATER UNTIL SUCH TIME THAT THE PERMANENT POOL BARRIER IS INSTALLED.

A building or structure may not be used or occupied until a certificate of use and occupancy has been issued.

I hereby acknowledge receipt of this form.

DATE: _____

Signature of applicant

* Applicant to sign and return with permit application *

SWIMMING POOL GUIDELINES

**Pennsylvania Department of Environmental Protection
Southeast Regional Office
2 East Main Street
Norristown, PA 19401**

The discharge of any sewage or industrial waste, including swimming pool water to a water of the Commonwealth without a permit is a violation of the Clean Streams Law, the Act of June 22, 1937 P.L. 1987, as amended.

It has been the Department's policy not to require permits for discharges from single residence pools provided the guidelines outlined below are followed. Local municipalities should be contacted concerning local ordinances.

These guidelines shall not be construed so as to waive or impair any rights of the Department of Environmental Protection to prosecute the property (pool) owner and/or pool company for any stream damage that occurs as a result of the discharge. Penalties would be assessed under the provisions of the Clean Streams Law.

Pool Guidelines:

A. Disposal of Water to Sanitary Sewer

1. If the municipal authority grants permission, discharging of pool backwash water, neutralized pool cleaning wastewater and standing water to the sanitary sewer system is the best environmental alternative. Care should be taken in making sure the discharge is to a sanitary sewer and not a storm sewer which would be hauled off-site for disposal at an approved treatment facility.

B. Discharge of Water

1. The following guidelines must be followed if water is not pumped or hauled to a sanitary sewer. Water should be pumped over a grassy area to allow absorption, filtration and aeration of water. The discharge should be at a rate which prevents erosion and optimizes infiltration. In no event shall pool waters be directly discharged to waters of the Commonwealth.
 - a. Standing water or accumulated rain and/or pool water from the previous season should be pumped from the top so as not to disturb settled solids. Solids on the pool bottom should not be discharged. Following pump down of water, solids should be cleaned out manually. The discharge should not raise instream temperatures by more than 2 degrees F in a one hour period or a total of 5 degrees F, pH should be between 6 and 9 standard units and total chlorine residual should be 0.0 mg/l.
 - b. Cleaning wastewaters containing muriatic acid or chlorine that is used in cleaning pool surfaces needs to be treated prior to discharge. Muriatic acid wastewater should be neutralized to a pH between 6 and 9 standard units. Chlorine rinses should stand for a period of days to allow chlorine degradation prior to discharge. Total chlorine residual of the wastewater discharge should be less than 0.5 mg/l. Temperature should be monitored as above (standing water), Chlorine rinse water pH should be between 6 and 9 standard units.
 - c. Filter backwash water during normal pool operation must be at a sufficiently low volume that all water infiltrates to the ground. Backwash water discharged to a stream or storm sewer is not permitted.

Questions concerning pool guidelines should be directed to Pennsylvania Department of Environmental Protection, Southeast Regional Office, Bureau of Water Management, Telephone: 484-250-5970.

Or Call Scott Gantt at New Garden Township 610-268-2915

ANY EARTH DISTURBANCE IN NEW GARDEN TOWNSHIP REQUIRES EROSION AND SEDIMENT CONTROL

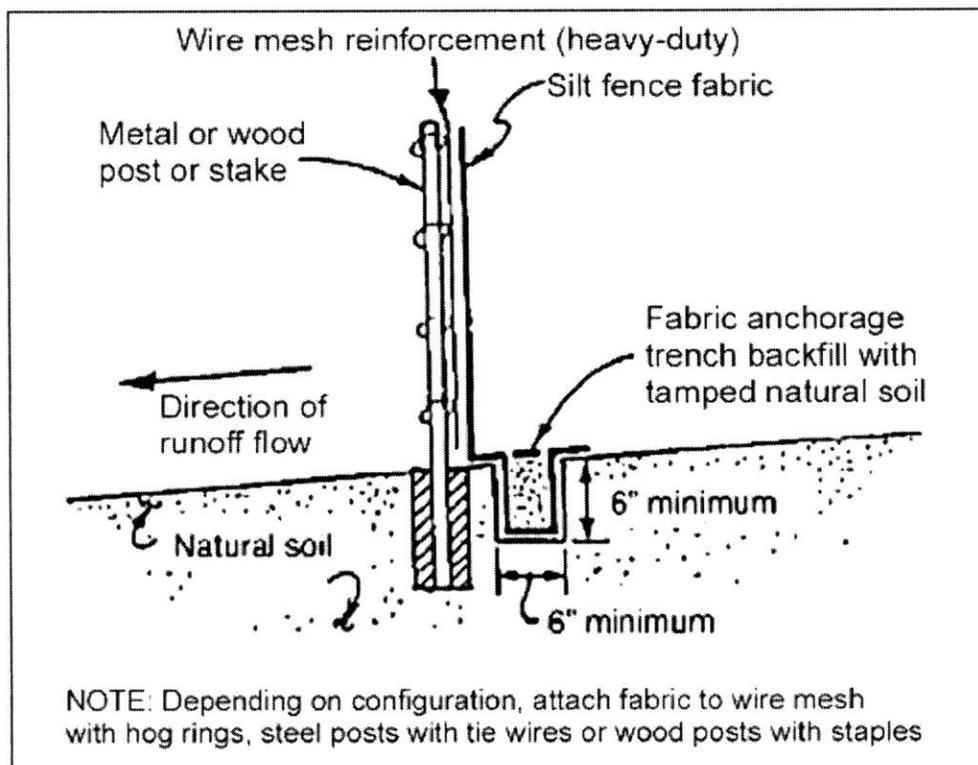


Figure 1: Typical Installation for Silt Fence

Read the following pages to learn about the requirements

New Garden Township

Erosion and Sediment Control Requirements

Q: When is an Erosion and Sediment Control Plan required?

A: Any project involving earth disturbance in New Garden Township requires erosion and sediment controls.

All earth disturbances greater than 5,000 square feet but less than acre must submit a written Erosion and Sediment Control Plan to New Garden Township and the Chester County Conservation District for review. Any disturbance associated with the use of Chapter 105 General Permit (GP) (stream crossing, wetland disturbance, pond dredging etc.), or one acre and greater disturbance must have an Erosion and Sediment Control Plan developed and then reviewed by the Conservation District office and the Township.

(5000 square feet is about 1/8 of an acre)

Q: What is NPDES and when do I need one of these permits?

A: NPDES is a federal program administered by the state. NPDES (National Pollutant Discharge Elimination System) is established to regulate all point source discharges (specifically-discharge of stormwater from construction sites). The County Conservation District has delegation authority to administer this program. Any proposed disturbance of 1 acre or more through the life of the project must have a NPDES permit.

- **General NPDES permit** – Issued by the District after District review of the Erosion and Sediment Control Plan and finds the plan adequate. This permit is for projects in non-protected watersheds
- **Individual NPDES permit** – Issued by PA DEP after recommendation from the District to issue and a 30 day publication in the PA Bulletin. This is for sites in High Quality / Exceptional Value Watersheds and those sites with possible environmental pollution or history of non-compliance.

Call the Township for more information: 610-268-2915

Chester County Conservation District: 610-925-4920