



Aspetuck Health District 180 Bayberry Lane, Westport, Connecticut 06880
T: 203-227-9571 F: 203-221-7199 W: www.aspetuckhd.org

<p style="text-align: center;">INSTRUCTIONS FOR COMPLETING AN APPLICATION TO CONSTRUCT A SWIMMING POOL/SPA</p>

<p>Fee: Swimming Pool on Septic \$290.00 Swimming Pool on Sewer \$175.00 Hot Tub \$120.00</p>
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- 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 ***Aspetuck 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 Aspetuck 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 Aspetuck Health District may require that a connection be made before any approvals are granted. *Health District Sanitary Code*, Section 3.3 (f) and (g).



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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 ☐ Easton
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
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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?

Owner or Duly Authorized Representative

Date

Signed _____

Email: _____

AHD 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 AHD 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