Issue Year:
Permit # :
Issued Date:

Township of Cedar Grove Health Department 525 Pompton Avenue Cedar Grove, NJ 07009

Phone# (973)239-1410 ext 224

Fax # (973)239-4187

APPLICATION FOR LICENSE TO OPERATE A PUBLIC SWIMMING POOL

NAME OF POOL:	
ADDRESS:	
PHONE NUMBER:	
APPROXIMATE OPENING DATE:	
CLOSING DATE:	
APPROXIMATE DAILY ATTENDANCE:	
APPROXIMATE MAIN POOL SIZE:	
APPROXIMATE WADING POOL SIZE: _	
POOL OWNER:	
OWNER ADDRESS:	
EMERGENCY CONTACT WITH PHONE	
INDIVIDUAL IN CHARGE OF POOL:	······
The undersigned agrees to operate the aforeme	
the provisions of the Code of the Township of	Cedar Grove, Chapter 239, entitled
"Swimming Pools, Public".	
Printed name of Applicant	Title
I Timed haine of Applicant	Tiuc
Signature of Applicant	Date