

Department of Public Works
City of Leominster, Massachusetts 01453
109 Graham Street
Tel: 978-534-7596
Fax: 978-534-7599
www.leominster-ma.gov

**APPLICATION FOR ABATEMENT
SWIMMING POOL ORDINANCE**

NAME(S) OF PROPERTY OWNERS(S) _____

MAILING ADDRESS _____

LOCATION OF REAL ESTATE UPON
WHICH ABATEMENT IS REQUESTED _____

PHONE NUMBER: _____

DATE _____

METER READING BEFORE FILLING _____

METER READING AFTER FILLING _____

GALLONS USED _____

**SIZE OF POOL
INCLUDING DEPTH** _____

**ALL APPLICATIONS MUST INCLUDE BUILDING PERMIT ON FILE AS REQUIRED BY
ORDINANCE, IN ADDITION TO COPY OF RECEIPT FOR PURCHASE OF POOL OR LINER.**

QUESTIONS?
CALL CAROL @ 978 962-3637

APPLICANT(S) SIGNATURE

PLEASE MAIL COMPLETED APPLICATION TO:
WATER DEPARTMENT
109 GRAHAM STREET
ATTN: CAROL
LEOMINSTER MA 01453

DATE

DOCUMENTS MAY ALSO BE SCANNED AND EMAILED TO:
callain@dpw.leominster-ma.gov