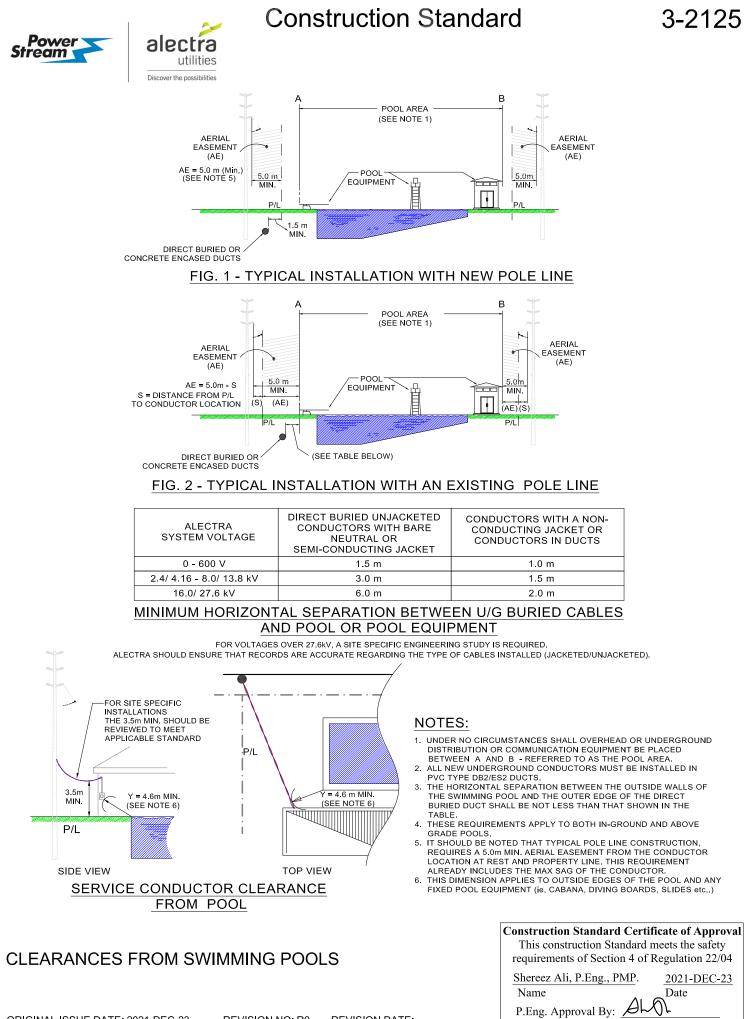


REQUEST FOR SWIMMING POOL CLEARANCE	
Property owner information	Pool company information
Name:	Company name:
Address:	Contact:
Telephone:	Telephone:
Registered Plan #:	Approximate construction date:
Lot #:	Comments:
Date submitted:	
Signature:	Submission #:
Submitted requests will be completed within 5 business days of receipt unless otherwise notified by Alectra Utilities and provided to requestor via method requested. Each approval is valid for 6 months	Reviewed by:
 Application checklist: Complete and sign Request for Swimming Pool Clearance Form (this form). Attach a site plan showing the Proposed pool location with pool size Location of associated equipment (pump, slide, buildings, etc.) Dimensions from property lines to the edge of the pool. Submit this form and the site plan to <u>RecordsEast.Info@alectrautilities.com</u> 	
Alectra Utilities approval stamp below	
Please complete this form and email to: RecordsEast.Info@alectrautilities.com	



ORIGINAL ISSUE DATE: 2021-DEC-23 REVISION NO: R0 REVISION DATE: