



PISCATAWAY TOWNSHIP CLERK'S OFFICE
455 HOES LANE, PISCATAWAY, NJ 08854
TOWNSHIP OF PISCATAWAY
(732) 562-2310

Application for Swimming Pool/Spa License

I (or we), the undersigned, do hereby make application for a license to operate a swimming pool/spa in the Township of Piscataway, and in the event such license is granted, I (we) agree to abide by all the provisions, rules, and regulations of the Middlesex County Health Department and the sanitary code of Piscataway Township:

Name of establishment

Establishment physical address

Establishment phone number

\$325 fee for seasonal pools

Manager name

Manager phone number

Pool Management Contact Information (if applicable)

Name of Corporation

Contact person for Corporation

Corporation mailing address

Corporation phone number

Contact information for Renewals

Contact name

Contact email address

Emergency contact for after hours (list at least 1 in addition to manager)

Name

Phone number

Name

Phone number

Failure to return complete application with fee by December 17th will result in a late fee of \$120.00 per month – effective January 1st.

ALL licenses expire on December 31st of the license year.

LICENSE FEE IS NON REFUNDABLE

Office Use Only	
Date received: _____	License Number: <u>P - _____ - 2022</u>
Payment Method: _____	Check/MO number: _____
Receipt number: _____	Processed by: _____