TOWN OF CAMBRIA
ABBREVIATED REQUIREMENTS FOR SWIMMING POOLS

INSPECTIONS:
AN ELECTRICAL INSPECTION IS REQUIRED AND IS THE RESPONSIBILITY OF THE PROPERTY OWNER TO ARRANGE. PLEASE SEE OUR LIST OF ELECTRICAL INSPECTORS.

SET BACK:
- MINIMUM 15 FEET FROM SIDE PROPERTY LINE
- MINIMUM 15 FEET FROM REAR PROPERTY LINE
- NO CLOSER TO ROAD THAN THE BACK OF THE RESIDENCE

PLOT PLAN:
- **PLEASE** PROVIDE ELECTRONIC COPY OF DRAWINGS & PLANS (USB, EMAIL, ETC)
- DIAGRAM SHOWING THE LOCATION OF POOL IN RELATION TO RESIDENCE AND OTHER BUILDINGS.
- SHOW SET BACK DISTANCE.
- SHOW SIZE OF POOL.
- INDICATE ABOVE GROUND OR IN-GROUND.
- INDICATE VALUE.
- SHOW LOCATION OF SEPTIC SYSTEM.

FENCING:
ABOVE GROUND POOLS:
- IF POOL WALL IS A MINIMUM OF 4 FEET ABOVE THE GROUND, MEASURED ON THE OUTSIDE OF THE WALL, THE ENTIRE PERIMETER OF POOL -- **FENCE IS NOT REQUIRED**
- IF POOL IS LESS THAN 4 FEET ABOVE THE GROUND AND IS CAPABLE OF HOLDING 24" OF WATER, OR MORE, - **FENCE IS REQUIRED**

IN-GROUND POOLS:
- FENCE REQUIRED

PLEASE NOTE:
- **ALL** POOLS REQUIRE ALARM SYSTEM
- ALL SWIMMING POOLS REQUIRE A FINAL INSPECTION BY THE TOWN'S BUILDING INSPECTOR AND WRITTEN ELECTRICAL CERTIFICATION BY A CERTIFIED ELECTRICIAN

TOWN OF CAMBRIA

COUNTY OF NIAGARA

Office of Building, Plumbing and Zoning

4160 Upper Mountain Road Sanborn, NY 14132
Phone: (716) 433-7664 ext. 133
www.townofcambria.gov

RBP – 20 -

Office Use Only

POOL PERMIT APPLICATION Fees: $_____

Jobsite Location: _____ Date: _____

Contractor/ Applicant: _____ Phone: _____

Address: _____

Email: _____

Property Owner: _____ Phone: _____

Address: _____

Email: _____

Pool Type: _____ Above Ground _____In Ground

Requirements before issuance of Permit:

_____ Survey of property showing placement
_____ Electrical Permit in Place
_____ Electronic copy of drawings & plans (USB, email, etc.)
_____ Site/Drainage Plan
_____ Drawings & Plans
_____ Proof of Insurance

Details: Type of inground pool (i.e. metal, masonry, etc.) _____

Size of pool: _____

Heated: ___Yes ___No **Fence Plan:** ___ Yes ___No

Estimated Cost: $_____ Proposed Date of Installation: _____

Electrician Name: _____ **Email:** _____

Address: _____

******Please Note:*** ***Homeowner to get electrical certificate to the Building Dept in order to receive a Certificate of Occupancy. Thank you. ******

The current schedule of fees state, "Business permits for all construction not obtained in accordance with this ordinance will be increased by 50%."

The undersigned certifies that all information submitted for this application is true and correct to the best of his/her knowledge. **Permit fees are non-refundable or transferable.**

Applicant Signature: _____ Date: _____

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ELECTRICAL INSPECTORS

Below is a list of licensed NYS Professional Electrical Inspection firms that have submitted credentials to this department and have been approved to do so in the Town of Cambria.

EMPIRE INSPECTIONS

TIM ENDERBY	585-798-1849	tenderby@empireinsp.com
MIKE REURIC	585-798-1849	mrearic@empireinsp.com

NEW YORK ATLANTIC INLAND, CO.

JOHN GARVIN	716-810-4500	jsgarven@gmail.com
JOE HOEHMAN	716-868-3219	joehoehman@gmail.com

COMMONWEALTH

JAMES BEVILACQUA	716-903-0346	bevecorp@aol.com

NEW YORK ELECTRICAL INSPECTIONS AGENCY

OFFICE	716-777-2611	office@nyeia.com

EXCELSIOR INSPECTIONS

JEFF LEIDOLPH	716-444-1237	jeff@excelsiorinspection.com

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