TOWN OF AURORA

BUILDING DEPARTMENT 300 Gleed Avenue, East Aurora, NY 14052 (716) 652-7591 FAX (716) 652-3507

TOWN OF AURORA AGREEMENT

I <u>, , as o</u>	owner of the premises at	, do
hereby state that, having read the g	eneral requirements for swimming pool enclosures (attach	hed)
I will comply with said requirement	ts prior to completion of the pool.	
I acknowledge my responsibility to	contact the Building Department immediately to schedule	e al
required inspections upon completion	on of installation of, and prior to, the use of the pool.	
I also acknowledge my responsib	oility to contact the electrical Inspector* for the necess	sary
electrical inspections prior to install	ation of the pool.	
I understand that a pool permit wi	ll not be issued until this letter is signed and returned to	the
Town of Aurora Building Departme	ent.	
I understand that a pool permit is or	aly valid for three (3) months.	
Signature	Date	
*The following are approved Electr	rical Inspectors for the Town of Aurora:	
Commonwealth Electrical Inspection	on Service, Inc. Office – General Info 585-624-2380	
Frank Boncore, Inspector		
	716-901-6430	
Rayne Degre, Inspector	716-868-1062	
Bob Smith, Inspector		
New York Electrical Inspection Ag	ency Office 585-436-4460	
Fritz Gunther, Inspector	585-230-4186	