

BUILDING PERMIT APPLICATION

<u>BS</u> DATE:

BUILDING & SAFETY DIVISION/COMMUNITY DEVELOPMENT

POOL/SPA/HOT TUB

THIS IS A PERMIT APPLICATION ONLY. WORK IS NOT AUTHORIZED UNTIL FEES HAVE BEEN PAID AND A BUILDING PERMIT HAS BEEN ISSUED.

ADDRESS:						CONSTRUCTION VALUATION \$:				D	ATE:	
DESCRIPTION												
SIZE OF PO	OL IN SF:											
OWNER				APPLICANT				CONTRACTOR				
ADDRESS				ADDRESS				ADDRESS				
CITY/ STATE/ ZIP				CITY/ STATE/ ZIP				CITY/ STATE/ ZIP				
PHONE			PHONE LICENSE				PHONE LICENSE			SE		
E-MAIL			E-MAIL			E-MAIL						
			W· ZONE						F	<u>з</u> ү. Г	DATE:	
PRE-SUBMITTAL ZONING REVIEW: ZONE PRELIMINARY REVIEW ONLY – NOT AN APPROVAL ZONE			OK FOR PLAN CHECK:				ок ото					
COMMENTS	6											
	STRUCTURE TYPE			√				#		E OF POOL		
	SINGLE-FAMILY RESIDENCE (PRIVATE) SINGLE-FAMILY HILLSIDE (PRIVATE)				POOL SAUNA					S THAN OR EQUAL TO 800 SF ER 800 SF		
	MULTI-FAMILY RESIDENCE (PUBLIC)				REPLASTER/NEW DECK					LONS:		
HOTI	HOTEL/MOTEL (PUBLIC)				ABOVE GROUND SPA OR HOT TUB							
	RECREATION CENTER (PUBLIC)				IN-GROUND SPA OR TUB							
HEALTH CLUB (PUBLIC)				(SEPARATE PERMITS REQUIRED FOR								
			MECHANICAL, ELECTRIC, PLUMBING)			,		EEN				
BWP/	/ ELECT	BWP/ W		1	TAIN SIGN-OFFS AFTER PLAN CHECK HAS BEEN APPROVED PW/ SEWER PUBLIC WORKS DEPT.							
FEE REQ'D : TYES NO FEE REQ'D: YES NO			INTERCEPTOR REQUIRED:							STREET IMPROVEMENT INSPECTION:		
FEE PAID: FEE PAID:		□ YES □ NO			CONNECTION CHARGE:			PERMIT NO	_ PERMIT NO			
DATE: DATE:		DATE:		DAT	DATE PAID:			—				
APPROVE BY: APPROVED BY:		BY:		APPI	APPROVED BY:				CURB CUT WIDTH			
				ADD	ADDRESS APPROVED:							
										RECURB (E) CUR	B CUT: □YES □ NO	
				BACKW	TER VALVE REQUI		ESTRIAN PROTEC			BY:		
									SITE PLAN CHECK	SITE PLAN CHECKED FOR EASEMENTS		
			ES 🗆 NO	DATE:		BY:	BY:			BY:	BY:	
PLACN CHECK FEE PAID:						SET	SETBACK FOR STREET WIDENING:			PUBLIC WORKS	DEPT. REQ'D NOTED:	
DATE:				BY:						CHECK SHEET:	□yes □no	
APPROVED BY:					BY:	BY:			BY:	BY:		
	PLA	NNING DIVISIO)N (planni	NG APPR	OVAL GIVEN ON	LY AFTER A	LL OF THE AB	OVE A	PPRO	VALS ARE OBTAINED))	
ZONE							COMMENTS					
	APPROVED BY: DATE:		FEE:									
APPROVE	D BY:		DATE.									
APPROVE	D BY:		DATE.									
		FOLLOWING STAT		E TRUE T	O THE BEST OF	MY KNOWLE	EDGE AND BEL	IEF:				
I DECLARE	E THAT THE ACKNOWLE	DGE THAT I HAVE R	EMENTS AR	LICATION	AND THE INFORMAT	TION STATED	HEREON IS TRUE	. I AGR		COMPLY WITH ALL ORDI ERMITS SHALL BE DEEM		