



APPLICATION FOR SWIMMING POOL PERMIT

(Application shall also be used for Spa and Hot Tub permits)

Complete all sections on both pages except for the two sections marked "For Office Use".

Application Date _____

PROJECT INFORMATION & LOCATION:

Project Type: <input type="checkbox"/> Commercial, <input type="checkbox"/> Multifamily, <input type="checkbox"/> Residential		Project Name: _____	
Structure Type: <input type="checkbox"/> Existing Building, <input type="checkbox"/> New Building, <input type="checkbox"/> Non-Habitable, <input type="checkbox"/> Temporary Structure			
Project Address _____		Unit/Suite/Floor _____ Zip Code _____	
Locator/ _____		Subdivision or _____	
Parcel No. _____		Building/Center Name _____ Lot No. _____	
<input type="checkbox"/> Unincorporated County, or Municipality _____		Fire District _____	

WORK DESCRIPTION:

Brief description of swimming pool construction scope of work:
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OWNER/TENANT INFORMATION:

Property Owner _____					
	Last Name	First	Telephone	Fax	Email
Owner's Address _____					
	Street Address	City	State	Zip Code	
Tenant/Business Name _____					<input type="checkbox"/> Existing, <input type="checkbox"/> New*
*If a New Tenant/Business indicate the Previous Tenant/Business Use _____					

ARCHITECT/ENGINEER INFORMATION:

Name & Address _____	Telephone _____	Fax _____	Email _____
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PRIMARY CONTACT INFORMATION IF OTHER THAN APPLICANT:

Name & Address _____	Telephone _____	Fax _____	Email _____
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APPLICANT CERTIFICATION & INFORMATION

I CERTIFY THAT I AM THE OWNER IN FEE OR AGENT AUTHORIZED TO APPLY FOR THIS PERMIT. THAT I HAVE AN AGREEMENT WITH THE OWNER/LESSEE TO PERFORM THIS WORK; AND THAT I AM AUTHORIZED TO AND DO CONSENT TO ENTRY ONTO THE PREMISES BY ST. LOUIS COUNTY EMPLOYEES FOR INSPECTION OF WORK PERFORMED UNDER THIS PERMIT. THE SCOPE OF WORK INDICATED AND COST ESTIMATES ARE TRUE AND CORRECT.			
IF A PARTIAL PERMIT IS BEING REQUESTED, I REQUEST AUTHORIZATION TO PROCEED WITH THE CONSTRUCTION INDICATED IN ORDER TO ALLOW CONSTRUCTION TO COMMENCE. I ACKNOWLEDGE THAT IF AUTHORIZATION IS GIVEN THAT I WILL BE PROCEEDING AT MY OWN RISK WITHOUT ASSURANCE THAT A PERMIT FOR THE ENTIRE WORK OR STRUCTURE WILL BE GRANTED. I AM RELEASING ALL LIABILITY, INDEMNIFYING AND HOLDING HARMLESS ST. LOUIS COUNTY, ITS OFFICERS, EMPLOYEES, AGENTS, AND ANY ASSIGNS FOR ANY EXPENSE, ERROR, OR OMISSION RESULTING IN SUCH ISSUANCE. SHOULD IT BE DETERMINED AT ANY TIME BY ST. LOUIS COUNTY THAT THE AUTHORIZED CONSTRUCTION NEEDS TO BE REMOVED, MOVED, CORRECTED, OR MODIFIED IN ANY FASHION, THAN SUCH REMOVAL OR CORRECTIVE WORK WILL BE AT OUR EXPENSE.			
Contractor Name & Address _____	Tel No. _____	Reg # _____	Signature _____
	Fax # _____	Date _____	Printed Name _____
	Email _____		
Applicant Other Than Contractor <input type="checkbox"/> Owner, <input type="checkbox"/> Architect, <input type="checkbox"/> Engineer, <input type="checkbox"/> Tenant, <input type="checkbox"/> Other _____			
Name & Address _____	Tel # _____	Reg # _____	Signature _____
	Fax # _____	Date _____	Printed Name _____
	Email _____		

PERMIT NO. _____

TYPE OF WORK	TYPE OF STRUCTURE			
<input type="checkbox"/> New Construction <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Replacement <input type="checkbox"/> Repair <input type="checkbox"/> Foundation <input type="checkbox"/> Shell <input type="checkbox"/> Interior Finish <input type="checkbox"/> Fire/Storm Damage <input type="checkbox"/> Occupancy <input type="checkbox"/> Miscellaneous Work	<p align="center">RESIDENTIAL</p> <input type="checkbox"/> Single-Family <input type="checkbox"/> Two-Family <input type="checkbox"/> Townhouse(s) Note: Two-Family and Townhouse type buildings must have independent dwelling units with individual entrances. No common areas.	<p align="center">MULTI-FAMILY</p> <input type="checkbox"/> 3 or 4 Multi-Family <input type="checkbox"/> 5 or more Multi-Family Units/Building _____ Units/Permit _____ Note: Multi-Family buildings have common areas such as common entry stairs, corridors, hallways, breezeways, and/or common basement areas.	<p align="center">COMMERCIAL</p> <p>ASSEMBLY</p> <input type="checkbox"/> Theatres <input type="checkbox"/> Restaurant <input type="checkbox"/> Night Club <input type="checkbox"/> Churches/Religious <input type="checkbox"/> Recreation Center <input type="checkbox"/> Exhibition Hall <input type="checkbox"/> Banquet Center <input type="checkbox"/> Taverns & Bars <p>BUSINESS</p> <input type="checkbox"/> Office/Bank/Professional <input type="checkbox"/> Carwash <input type="checkbox"/> Clinic <input type="checkbox"/> Fire Station <input type="checkbox"/> Doctor's Offices <input type="checkbox"/> Laboratories <p>EDUCATION</p> <input type="checkbox"/> Schools <input type="checkbox"/> Child Day Care	<p align="center">NON-HABITABLE</p> <input type="checkbox"/> Antennas <input type="checkbox"/> Attached Garage <input type="checkbox"/> Barn <input type="checkbox"/> Carport <input type="checkbox"/> Detached Garage <input type="checkbox"/> Fence <input type="checkbox"/> Fireplace <input type="checkbox"/> Generators <input type="checkbox"/> Patio Cover <input type="checkbox"/> Patio/Deck/Porch <input type="checkbox"/> Pergola <input type="checkbox"/> Res. Greenhouse <input type="checkbox"/> Retaining Walls <input type="checkbox"/> Shed <input type="checkbox"/> Signs <input type="checkbox"/> Solar Panel/Array <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Tanks <input type="checkbox"/> Tower <input type="checkbox"/> Trash Enclosure <input type="checkbox"/> Other <input type="checkbox"/> Parking Lot
SWIMMING POOL, SPA, or HOT TUB				
Type Structure: <input type="checkbox"/> Above / On-ground Swimming Pool <input type="checkbox"/> Spa <input type="checkbox"/> In-ground Swimming Pool <input type="checkbox"/> Hot Tub				
Master Plan # _____ Master Plan Option(s): _____				
Water Surface Area _____ square feet, Shape: _____ Diameter _____ feet, or Width _____ feet x Length _____ feet, Depth _____ feet				
Swimming Pool, Spa, or Hot Tub Barrier Information (check all that apply):				
<input type="checkbox"/> Fenced yard, <input type="checkbox"/> Fenced pool area, <input type="checkbox"/> Self-closing/self-latching gate(s), <input type="checkbox"/> Swimming pool wall or mounted barrier, <input type="checkbox"/> Ladder access area enclosure w/gate, <input type="checkbox"/> Deck with guard rail, <input type="checkbox"/> Alarm devices on dwelling door(s), <input type="checkbox"/> Self-closing self-latching dwelling door(s), <input type="checkbox"/> Pool equipped with a powered safety cover, <input type="checkbox"/> Other _____				
Site Sewage Disposal: <input type="checkbox"/> Sewer, <input type="checkbox"/> Septic, <input type="checkbox"/> Other _____				
Site Storm Water Drainage: <input type="checkbox"/> Swales & site drainage pattern will not be blocked or affected by pool location. <input type="checkbox"/> Swale &/or site drainage pattern will be modified to accommodate pool location.				
Comments/Information: _____				
Other Permit References _____				
Estimated Cost of Pool Including Installation Work: \$ _____				
*On Residential include Electrical, Mechanical, and Plumbing in Total Construction Cost.				
<p>Note: Electrical, plumbing, and/or mechanical work associated with the swimming pool installation must be performed by licensed and bonded electrical contractors, master plumbers, and/or licensed contractors authorized to do mechanical work. For residential projects, the licensed electrical contractor must sign the supplemental application form before the Integrated Swimming Pool, Spa, or Hot Tub Permit can be issued to the swimming pool contractor/installer. When the pool includes plumbing or mechanical work the master plumber and licensed contractor authorized to do mechanical work must sign onto the permit, using the sign-on forms that will be provided to the applicant at the time of permit issuance, and return the sign-on forms before their work commences. For multi-family and commercial pool projects each discipline contractor must apply for their own discipline permit.</p>				
<p>FOR OFFICE USE</p> <input type="checkbox"/> Record Check _____ <input type="checkbox"/> Violation Check _____ <input type="checkbox"/> Transient Employer Documents <input type="checkbox"/> Notified _____ Date _____ <input type="checkbox"/> #OP _____ PAC No. _____ <input type="checkbox"/> PA <input type="checkbox"/> Flat Permit No. _____ <input type="checkbox"/> Closet				<p>FOR OFFICE USE</p> Zoning Dist. _____ <input type="checkbox"/> Gov't / Public Owned <p>PERMIT FEES</p> Processing _____ Building _____ Electrical _____ Plumbing _____ Mechanical _____ Drainlaying _____ Piers _____ Foundation _____ Land Disturb. _____ Inspection _____ _____ Penalty _____ Total Fees _____ Filing Fee Pd _____ Balance Due _____ Fees Paid _____ Date Issued ____/____/____ Issued By _____ <p>APPROVALS & DATE</p> Est. Cost _____ Zoning Rev. _____ Plan Rev. _____ Box No. _____ <input type="checkbox"/> Folder



SUPPLEMENTAL APPLICATION FORM FOR RESIDENTIAL INTEGRATED SWIMMING POOL PERMITS

(Application shall also be used for Spa and Hot Tub Permits)

Instructions: Generally there is electrical work associated with almost every swimming pool. All electrical work must be performed by licensed and bonded electrical contractors licensed in St. Louis County. The licensed electrical contractor must complete and sign this form and the completed form with affixed signature submitted to the County before the Residential Integrated Swimming Pool Permit can be issued to the Swimming Pool Contractor/Installer.

ELECTRICAL CONTRACTOR CERTIFICATION & SIGN-ON

Project Address: _____ **Owner Name:** _____

Pool Contractor/Installer: _____ **Permit Application # (if filed):** _____

Pool Contractor/Installer Contact Info: _____

I certify that the Project Address and Owner Name lines above have been filled in, that the signature on this Supplemental Application Form for Residential Integrated Swimming Pool Permits is my signature. By signing this form I hereby attest that I have an agreement with the owner and/or pool contractor/installer to perform the entire scope of electrical work as described below for the swimming pool being installed at this address, including the bonding/grounding associated with the pool, and that I or my employees as defined in the St. Louis County Electrical Code will perform all work regulated by the aforementioned code and the National Electrical Code.

Description of electrical work:			
Electrical Contractor Name & Address	Telephone #	License #	License Holder's Signature
	FAX #	Date	License Holder's Printed Name
	Email		

This Supplemental Application Form must be completed and submitted to St. Louis County before the Residential Integrated Swimming Pool Permit can be issued to the Swimming Pool Contractor/Installer.