

This section office use only			
Application #		Receipt #	
Cash <input type="checkbox"/>	CC <input type="checkbox"/>	Phone order <input type="checkbox"/>	
Check #		Balance due	
Permit type		Plan #	TIFF #

Swimming Pool/Spa

Date	
<ul style="list-style-type: none"> ● All application fees are non-refundable ● All credit card transactions include a 2% convenience fee ● Permits and approved plans must be posted on site as failure to post may result in re-inspection fee ● City will call when permit is ready for pickup ● Application must be completed in its entirety prior to submittal 	

Check all that apply:							
<input type="checkbox"/> Interior lot	<input type="checkbox"/> Corner lot	<input type="checkbox"/> In ground	<input type="checkbox"/> Above ground	<input type="checkbox"/> Pool	<input type="checkbox"/> Spa	<input type="checkbox"/> Residential	<input type="checkbox"/> Commercial
Job Address						Suite #	
Subdivision				Block			Lot
Property owner name						Phone #	
Tenant/business name						Phone #	
Is permanent backwash drain connection to sewer? Yes <input type="checkbox"/> No <input type="checkbox"/>				Cost of work being done		\$	
Pool barrier height:		Gate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Gate swing: In <input type="checkbox"/> Out <input type="checkbox"/>				
Gate latch provided? Yes <input type="checkbox"/> No <input type="checkbox"/>	Latch: Inside <input type="checkbox"/> Outside <input type="checkbox"/>		Latch height:				
Pool Contractor (contact person)						Carrollton ID#	
Company Name						Expiration	
Company Address						Phone	
Electrical Contractor (contact person)						Carrollton ID#	
Company Name						Expiration	
Company Address						Phone	
Plumbing Contractor (contact person)						Carrollton ID#	
Company Name						Expiration	
Company Address						Phone	

Contact all public utility companies for line locations at **1-800-245-4545**

By signing below, I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any state or local law regulating construction or the performance of construction. The issuance of any permit neither exempts nor modifies any covenants, deed restrictions, city ordinances and/or state or federal laws, whether herein specified or not.

***AN EMAIL ADDRESS OF THE MAIN CONTACT MUST BE PROVIDED TO RECEIVE INSPECTION RESULTS.**

Check for additional checklist information on reverse side of application

Name			Signature	
Phone		Email*		

Requirements

Pools
<input type="checkbox"/> 2 copies of plot plans
<input type="checkbox"/> 2 copies of pool drawings
<input type="checkbox"/> List type of materials used
<input type="checkbox"/> Drawings must be reviewed and stamped by electrical provider: Oncor/ Coserv Delivery
<input type="checkbox"/> Drawings must show pool in relation to house with dimensions
<input type="checkbox"/> Drawings must have a cross-section of pool showing depths
<input type="checkbox"/> 1 House pool protection device plan, signed by homeowner and notarized on same date

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