

City of Alpharetta



POOL PERMIT APPLICATION

Application is hereby made according to the laws and ordinances of the City of Alpharetta, Georgia for a permit to construct and use a pool as described herein and shown on City codes compliance reviewed plans and specifications and to be located as shown on the accompanying City reviewed plat plan and, if same is granted by the City, I/we agree to conform to all laws and ordinances regulating same.

ALL APPLICABLE BLANKS MUST BE FILLED IN – NO P.O. BOX ADDRESSES - PLEASE PRINT LEGIBLY

Date: _____ **Applicant is:** Owner/Agent Contractor/Agent **Pool is:** Residential Commercial

PROPERTY INFORMATION

Project Street Address: _____ Lot No.: _____

Subdivision Name: _____ Public Sewer Private Sewer

City Zoning Classification _____ Land Lot: _____ District: _____ Section: _____

Lot Building Lines: Left Side Setback: _____ ft. Right Side Setback: _____ ft. Rear Setback: _____ ft.

PEOPLE INFORMATION

Property Owner: _____ Phone No. _____

Street Address: _____ Suite No. _____

City: _____ State: _____ Zip: _____

Contractor: _____ Phone No. _____

Street Address: _____ Suite No. _____

City: _____ State: _____ Zip: _____

Business Reg. No. _____ Where Issued: _____ Expires: _____

POOL INFORMATION

Type: In ground Above Ground Material: Gunitite/Shotcrete Vinyl Other: _____

Water's Edge Closest Point To: Rear Lot Line _____ ft. Side Lot Line _____ ft. House / Structure _____ ft.

Pool Length: _____ LF Pool Width: _____ LF Pool Surface area: _____ sq. ft. Capacity: _____ gal

Shallow Depth: _____ ft. Deep Depth: _____ ft.

Filter Type: _____ Chemicals Used: _____

Pump Type: _____ Size: _____ hp. Operating Pressure: _____ psi

Heated Pool? No Yes Heater Type: Electric Gas Capacity: _____ BTUs Gas Line Size: _____

Length of gas line from meter to pool heater: _____ LF

Will accessory structures, spas, waterfalls, slides, retaining walls, etc. be included in construction? No Yes
(May require separate plans and permits)

If Yes - Briefly Describe: _____ Spa Area _____ sq. ft.

Associated Work? Electrical Gas Sewer Alteration Low Voltage – (Alarm, Lighting, etc.)
(Requires separate permits)

Applicant Printed Name: _____ Signature: _____

Applicant Email Address: _____ Phone: _____