

# 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 building or structure as described herein and shown on the City code 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

Application Date: \_\_\_\_\_ Applicant is:  Owner/Agent  Contractor/Agent

### PROPERTY INFORMATION

Project Street Address: \_\_\_\_\_

Pool is:  Commerical  Residential \_\_\_\_\_ City LDP No: \_\_\_\_\_

PROPERTY OWNER: \_\_\_\_\_ Phone \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Registration No: \_\_\_\_\_ Issued In: \_\_\_\_\_ Expires: \_\_\_\_\_

Contractor License No: \_\_\_\_\_ State: \_\_\_\_\_

Qualifying Agent: \_\_\_\_\_ Qualify Agent No. \_\_\_\_\_

### WORK INFORMATION

Type:  In-Ground  Above Ground  Gunite/Shotcrete  Vinyl  Other \_\_\_\_\_

Water's Edge Closet Point To: Rear Lot Line: \_\_\_\_\_ ft Side Lot Line \_\_\_\_\_ ft House/Structure: \_\_\_\_\_ ft

Pool Length: \_\_\_\_\_ lf Pool Width: \_\_\_\_\_ lf Pool Surface area: \_\_\_\_\_ sqft Capacity: \_\_\_\_\_ gal

Shallow Depth: \_\_\_\_\_ ft Deep Depth: \_\_\_\_\_ ft

Filter Type: \_\_\_\_\_ Chemical Used: \_\_\_\_\_

Pump Type: \_\_\_\_\_ Size: \_\_\_\_\_ hp Operating Pressure: \_\_\_\_\_ BTUs

Heated Pool:  No  Yes Heater Type:  Electric  Gas capacity \_\_\_\_\_ BTU

Gas Line Size: \_\_\_\_\_ Length of gas line from meter to pool heater \_\_\_\_\_ lf

Will accessory structures, spa, waterfalls, slides, retaining walls, etc. be included in construction:  yes  no

Associated Work?  Electrical  Low Voltage  Mechanical  Plumbing

Applicant Printed Name: \_\_\_\_\_ Application Signature: \_\_\_\_\_

Applicant Email: \_\_\_\_\_ Phone: \_\_\_\_\_