

City of Trussville
 Engineering and Inspection Services
SWIMMING POOL PERMIT APPLICATION

PERMIT # _____

JOB ADDRESS _____

SUBDIVISION _____ LOT _____

OWNER'S NAME _____

DESCRIPTION OF WORK	TYPE OF POOL	CONTRACTOR
_____ _____ _____	<input type="checkbox"/> VINYL <input type="checkbox"/> CONCRETE <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> GRANITE <input type="checkbox"/> ABOVE GROUND	ELECTRICIAN _____ PLUMBER/GAS _____ FENCE CONTRACTOR _____

**** Please attach copy of survey showing location of pool and protective barrier ****
**** Please attach copy of signed Barrier Requirements ****

Contract Cost \$ _____

Total Fees \$ _____

COMPANY NAME _____ Cell Phone # _____

ADDRESS _____ Office Phone # _____

I hereby certify that I have read this application and that all information contained herein is true and correct and that I agree to comply with all City Ordinances and State Laws regulating swimming pool construction and installation. I understand that it is my responsibility as the Swimming Pool Contractor to make sure all fencing, barrier requirements and alarms are installed prior to filling pool with water. I will schedule a Final Inspection when job is completed. I am the Owner or Contractor Acting as the Owner's Agent for the herein described work.

 Signature of Contractor of Authorized Agent

 Date