

| For office use | |
|----------------|--|
| Fence Permit # | |

SWIMMING POOL/SPA PERMIT APPLICATION

| Application Date: | Permit # |
|--|--|
| Property Address: | |
| Property Owner: | |
| Phone #: | E-mail Address: |
| Above Ground [] In-groun | d [] Pool Dimensions: Depth: Width: |
| If water depth is greater than requirements). Complete the Type of barrier to be used: | 24", a barrier is required (see <u>Swimming Pools handout</u> for barried following: |
| Above Ground Pool > | 48" above grade with lockable ladder |
| Free-standing fence | 8" or greater in height |
| Other (describe) | |
| Barrier not required | |
| Electrical Requirements need CONTRACTOR: | ed? Yes[] No[] |
| | |
| Phone #: | E-Mail: |
| License #: | Value of Project: \$ |
| | permit issued to the applicant are subject to all Ordinances of the project. |
| I hereby declare the above informa | on is true and correct. |
| Applicant Signature: | |
| Building Official | Zoning Official |
| Save completed form and a | ny attachments needed. Email to Robinspermits@cityofrobins.org |

ALL WORK SHALL BE INSPECTED Please call 319-393-0588 to schedule