

## **Swimming Pool/Spa Permit Application**

| Permit #: |  |
|-----------|--|
|-----------|--|

152 N Main Drive, Van Alstyne, Texas 75495 Phone 903.482.5426

Incomplete application and/or submittal will delay the review process. Please email all applications to <a href="mailto:permits@cityofvanalstyne.us">permits@cityofvanalstyne.us</a>

| ☐ Pool/Spa Co  | ombination                | ☐ Pool (In-ground)                                     | ☐ Pool (Above Ground)  | ☐ Spa Only                          | ☐ Splash Zone |  |
|--|---------------------------|--|--|-------------------------------------|---------------|--|
| Job Address: _   |                           |  |  |                                     | _             |  |
| Legal Descripti  | on: Lot:                  | Block:   | _ Subdivision:   |                                     | Phase:        |  |
| Description of v   | work:                     |  | onsibility to coordinate correla   | Estimated \                         | Value:        |  |
|  | Please note               | , it is the contractor's resp<br>Please do not begin o | onsibility to coordinate correla<br>onstruction until ALL permits a  | ting projects on one pare approved. | roperty.      |  |
| Property Owne  | r Name                    |  |  |                                     |               |  |
|  |                           |  |  |                                     |               |  |
|  |                           |  |  |                                     |               |  |
| Electrical Contractor  |                           |  |  | E-mail                              |               |  |
| Plumbing Contractor  |                           |  |  | E-mail                              |               |  |
| Total Area:  |                           | Total Volume: _  |  | Maximum Depth:                      |               |  |
| Setbacks: (mea   | asured from o             | excavation perimeter)                                  |  |                                     |               |  |
| Structures w/ fo   | oundations: _             | Left: _  | Right:   | Re                                  | ar:           |  |
| Heater:  | □ N/A                     | ☐ LP Gas   | ☐ Natural Gas  |                                     |               |  |
| Filter Type:   | ☐ DE                      | ☐ Cartridge**  |  |                                     |               |  |
| Sewer: ☐ City ☐ Septic**  If septic, the site plan and pool plan submittal requires stamped approval from Grayson County Development Services (GCDS) prior to submittal to the City of Van Alstyne. For more information, please contact GCDS. |                           |  |  |                                     |               |  |
| P-Trap: ☐ Yes ☐ No** **If a cartridge filter is proposed OR the property is on septic, a p-trap and backwash line are <u>NOT</u> required.   |                           |  |  |                                     |               |  |
| Fences surrou  | nding pools s             | hall comply with Append                                | If yes, height:  | _ Type:<br>Requirements of the 2    | 2015 IRC. New |  |
| is correct to the specifications a   | e best of my las approved | knowledge. The project of                              | necessary application and tha<br>lescribed herein shall be built<br>all comply with the most recer<br>ces and regulations. | in accordance with th               | ne plans and  |  |
| Applicant / Age  | ent Name (PF              | RINT)  |  |                                     |               |  |
| Applicant / Age  | ent Signature             |  |  | Date                                |               |  |