

Permit #: _____



Pool Permit

City of Rincon, Georgia
Planning and Development Services
Phone: (912) 826-5996 / Fax: (912) 826-2083
www.cityofrincon.com

Applicant to complete all that apply:

Date: _____

Job Address: _____ Parcel and Lot #: _____

Owner: _____ Mailing Address: _____

Phone: _____ Email Address: _____

Contractor: _____ Mailing Address: _____

Phone: _____ Email Address: _____

Size of pool: _____ Depth of pool: _____ Total gallons: _____ Number of Pumps: _____

Size of pump(s): _____ Total G.P.M. of pump(s): _____ Type of enclosure (FENCE): _____

Describe Work: _____

Project Square footage: _____ Total Valuation of Project: _____

Required:

- Electrical permit with contractor's trade and business license.
- Copy of pool contractor's business license.
- Copy of pool layout, with property plat **(This is to verify any easements.)**
- Contractor(s) **AND** the Homeowner / Owner must sign this application.

NOTICE

THIS PERMIT BECOMES NULL AND VOID IF WORK OR CONSTRUCTION AUTHORIZED IS NOT COMMENCED WITHIN 12 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not, the granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Certified Contractor: _____

Home Owner / Owner: _____

Approved: _____ Date: _____

Planning and Development Inspector