

## CITY OF FAIR OAKS RANCH

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## PERMIT APPLICATION SWIMMING POOL

Project Address:	U	Jnit:		Lot:		
(Street)						
Owner Name:	Phone: (	)_				
Applicant:	Engineer:	located la	ass than	10 ft from hou	so founds	ation)
	(Engineering study required if pool is	s located le	ess than	10 ft. from nous	se rounda	ation)
Email:	Phone:(	)				
Impervious Coverage Sq. Ft.: # of gallons:	Existing Fence?	: Y	N	Gas Line?:	Υ	N
Pool Contractor:	Phon	e:(	)			
Address:	City:		ST	:Zip:_		
(OFFICE USE ONLY) City Registration #:	Exp Date:					
Electrical Contractor:	Phone:(	)_				
Address:	City:		ST:_	Zip:		
(OFFICE USE ONLY) City Registration #:	Exp Date:					
Plumbing Contractor(If Applicable):	Phone:	(	)			
Address:	City:		ST:_	Zip:		
(OFFICE USE ONLY) City Registration #:	Exp Date:					
Notes:						
Signature of Contractor/Agent:			Date:_		/	
********OFFICE	USE ONLY*******					
INSPECTIONS REQUIRED:	DATE REC'D:			BY:		
☐ PRE-GUNITE	APPROVED BY:					
□ POOL BARRIER □ GAS LINE □ FINAL	DATE APPROVED:					/