



Fulton County
 Planning and Community Services
 5440 Fulton Industrial Blvd
 Atlanta, GA 30336
 404-612-7800 www.fultonecd.org

Permit No. _____ - _____
 Total Permit Fee: \$ _____
 Administrative Fee: \$ _____
 PIN# _____

SWIMMING POOL PERMIT APPLICATION

Site/Fence Information

Please Print

***All private pools must be completely enclosed by a fence, wall or building not less than 5' high with self-closing, positive latching gates per Zoning Resolution 19.3.12 A separate fence/wall permit is not required when included at the time of pool permit application. Pools must be located in the side or rear yard only. The pool, pool equipment, and pool deck must be 10' from all property lines. Decks must be included in the total square footage.**

Check one: Single Family / Multi-family Non-Residential/Public Neighborhood/Community

Site Address _____ Construction Cost: _____
 Subdivision or Project Name _____ Phase/Unit _____ Septic Sewer

Work Includes: **SEE BELOW** Total Area in Square Feet: _____ Land Disturbance No: _____

SPECIAL FLOOD HAZARD OR FLOOD PRONE AREAS: A permit shall be required prior to commencement of any improvement, including grading and filling, within the Special Flood Hazard of Flood Prone Areas. An "as-built" lowest floor elevation certificate must be submitted to this Department prior to issuance of a certificate of occupancy or power release if any structures are built in or immediately adjacent to a Special Flood Hazard Area. This certificate shall be prepared by a professional engineer or surveyor licensed by the State of Georgia. All plans required by this Department for any improvement within a Special Flood Hazard or Flood Prone area must be reviewed by the Planning and Community Services Department.

Owner's Information

Name _____ e-mail: _____
 Address _____ Phone _____
 City _____ State _____ Zip _____ Fax No. _____

Contractor's Information

Business Name _____ Agent _____
 Address _____ Phone _____
 City _____ State _____ Zip _____ Fax No. _____
 Business License No. _____ City or County where issued _____
 Escrow Account No. _____ e-mail _____

Work Includes (circle one):

For Homeowner Permits Only: Will trade work be done by a licensed contractor? **YES / NO** (If NO, before a permit can be issued, all homeowners must obtain prior approval from the appropriate Inspector to perform these jobs if there is no subcontractor at the time of permitting.)

Please complete for each trade:	ELECTRICAL (Yes / No)	MECHANICAL (Yes / No)	FENCE (Yes / No) IF NO, PRE-INSPECTION REQUIRED BEFORE PERMIT
Subcontractor's Name:			Contractor Name:
Company Name:			Material:
Street Address: City, State, & Zip			Height:
Phone No.			Location:
State Certification No.			Total Linear Feet:
Business License No.			<input type="checkbox"/> New or <input type="checkbox"/> Partial Construction

*If sub-contractor information is not available at time of permit, subcontractor must apply separately.

Applicant's Certification

I hereby certify that the site described herein will be constructed and/or used in accordance with all applicable zoning ordinances and laws governing the Planning and Community Services Department.

Applicant's Signature _____ Date _____