

Date \_\_\_\_\_

Permit No. \_\_\_\_\_ -P

# Township of Robinson

## APPLICATION FOR RESIDENTIAL OR COMMERCIAL SWIMMING POOL PERMIT

<b>Owner Information And Site location</b>	Name _____ Address _____ _____ Phone _____ Subdivision _____ Lot _____ Block _____ <b>Construction costs</b> _____ Note: A copy of your Homeowners insurance declaration page is required for self installed pools and spas		
<b>Application type</b>	<b>Pool Type</b> <input type="checkbox"/> Above gnd. <input type="checkbox"/> In ground <input type="checkbox"/> Spa <b>Note: Public pools require L&amp;I Review</b>	<b>Classification</b> <input type="checkbox"/> Private <input type="checkbox"/> Public	<b>Enclosures/Protections</b> <input type="checkbox"/> Existing <input type="checkbox"/> Proposed <input type="checkbox"/> 4' fence around pool <input type="checkbox"/> Lockable cover <input type="checkbox"/> 4' fence around yard <input type="checkbox"/> Alarm <input type="checkbox"/> 4' pool wall above grade <input type="checkbox"/> Self closing/latching gates
<b>Zoning Information</b>	<b>Pool Dimensions</b> Length _____ Width _____ Depth _____ Capacity _____ Gallons	<b>Pool Setbacks</b> Distance from rear of house _____ feet Distance from rear property line _____ feet Distance from left side property line _____ feet Distance from right side property line _____ feet	
<b>General Information</b>	<input type="checkbox"/> Slab on grade concrete <input type="checkbox"/> Finished floor of deck 30" or lower above adjoining grade <input type="checkbox"/> Finished floor of deck over 30" above adjoining grade <input type="checkbox"/> Height of pool wall _____		
<b>Pool Heating</b>	<b>Mechanical (Natural gas or Propane)</b> <input type="checkbox"/> Yes – Requires Residential Mechanical Permit and Inspections <input type="checkbox"/> No		
<b>Electrical Information</b>	<b>Overhead/Underground Wires</b> <input type="checkbox"/> Overhead Vertical dist. _____ Horizontal dist. _____ <input type="checkbox"/> Underground    Horizontal dist. _____	<b>Receptacles:</b> <input type="checkbox"/> GFCI within 20' of pool wall <input type="checkbox"/> Additional receptacles within 20' need GFCI Protection	<b>Underwater Luminaire</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Fee Schedule</b>	<b>Payable to Plans-Examiners Inc.</b> In ground pool: <b>\$258.00</b> – Pass condition Above ground pool: <b>\$129.00</b> – Pass condition Spa: <b>\$129.00</b> – Pass condition A re-inspection fee of \$75.00 may apply if inspection fails. It is the applicant's responsibility to call the Township when the installation is complete to schedule the inspection.		
<b>Signature and Affidavit of Receipt of Chapter 42 and Appendix G of the 2009 International Residential Code</b>	<b>I have received a copy of the 2009 International Residential Code chapter 42 and Appendix G requirements (For Residential Swimming Pools) along with this application and understand that inspection will be made to the guidelines contained within them.</b>  <b>Applicant:</b> _____		
<b>Zoning Approval Required prior to application submittal to Plans-Examiners Inc.</b>	<b>Zoning Approved By:</b> _____		

<b>Contractor Information:</b>	Name _____ Address _____ _____ Phone _____ Fax _____ E-mail _____
<b>Insurance Information</b>	Company Name _____ Address _____ Policy No. _____ Exp. Date _____ Coverage Amount _____  Note: A copy of your insurance certificate must accompany this application.
<b>Applicant Signature</b>	Print Name: _____  Signature _____ Date _____

**-OFFICIAL USE ONLY-**

FEE SCHEDULE _____ RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL _____ DEMOLITION _____ SIGNS           X               = _____ OTHER _____ OTHER _____  TOTAL _____	PERMIT ISSUED _____ PERMIT DENIED _____  REASON REVISED _____  Z.H.B.CASE # _____  Z.H.B. DECISION _____  X BUILDING CODE OFFICIAL OR CONSTRUCTION CODE OFFICIAL CERTIFICATION NO. _____
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PERMIT# \_\_\_\_\_ -P

# COMMERCIAL OR RESIDENTIAL SWIMMING POOL

## REQUIRED INSPECTIONS

IT IS MANDATORY TO CALL PEI FOR INSPECTIONS

AT 412-787-1510 OR VISIT:

<http://plans-examiners.com/townshipofrobinson.html>. - **48-HOUR NOTICE REQUIRED**

Project Name: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone \_\_\_\_\_

For Department use only

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**Underground Rough Electrical:** Prior to backfilling of any part. Grounding and bonding requirements must be met.

Required:

Date:

Inspector Cert. #

Inspector Signature:


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**Final Electrical:** To be completed when systems are complete and operational.

Required:

Date:

Inspector Cert. #

Inspector Signature:


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**Final Pool:** Guards and barriers must be in place and final electrical inspection approved. Prior to use of the pool. Accessible ingress and egress requirements apply to public pools.

Required:

Date:

Inspector Cert. #

Inspector Signature:


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**INSPECTION PENALTY:**

Inspections not cancelled by 4:00pm of the previous regular business day preceding the day of the scheduled inspection, and re-inspections of previously failed items that incur subsequent failures of the same punch list item shall be subject to a \$75.00 fee per incident.

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