

Date _____

Permit No. _____-P

Township of Robinson

APPLICATION FOR RESIDENTIAL OR COMMERCIAL SWIMMING POOL PERMIT

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| Owner Information And Site location | Name _____ Address _____ _____ Phone _____ Subdivision _____ Lot _____ Block _____ Construction costs _____ Note: A copy of your Homeowners insurance declaration page is required for self installed pools and spas | | |
| Application type | Pool Type <input type="checkbox"/> Above gnd. <input type="checkbox"/> In ground <input type="checkbox"/> Spa | Classification <input type="checkbox"/> Private <input type="checkbox"/> Public Note: Public pools require L&I Review | Enclosures/Protections <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 |
| Zoning Information | Pool Dimensions Length _____ Width _____ Depth _____ Capacity _____ Gallons | Pool Setbacks 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 | |
| General Information | <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 _____ | | |
| Pool Heating | Mechanical (Natural gas or Propane) <input type="checkbox"/> Yes – Requires Residential Mechanical Permit and Inspections <input type="checkbox"/> No | | |
| Electrical Information | Overhead/Underground Wires <input type="checkbox"/> Overhead Vertical dist. _____ Horizontal dist. _____ <input type="checkbox"/> Underground Horizontal dist. _____ | Receptacles: <input type="checkbox"/> GFCI within 20' of pool wall <input type="checkbox"/> Additional receptacles within 20' need GFCI Protection | Underwater Luminaries <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Fee Schedule | Payable to Plans-Examiners Inc. In ground pool: \$290.00 – Pass condition Above ground pool: \$150.00 – Pass condition Spa: \$150.00– Pass condition Mechanical is not included for *project - fee \$80.00 per inspection; Mechanical permit required. Additional fee to the Township for all permits. A re-inspection fee of \$80.00 may apply if inspection fails. It is the applicant's responsibility to call the Township when the installation is complete to schedule the inspection. | | |
| Signature and Affidavit of Receipt of Chapter 42 & Pool & Spa Code , 3, 7 and 8 of the 2015 International Residential Code | I have received a copy of the 2015 International Residential Code chapter 42 & Chapters 3, 7 & 8 of 2015 International Pool & Spa Code requirements (For Residential Swimming Pools) along with this application and understand that inspection will be made to the guidelines contained within them. Applicant: _____ | | |
| Zoning Approval Required prior to application submittal to Plans-Examiners Inc. | Zoning Approved By: _____ | | |

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

-OFFICIAL USE ONLY-

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| 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. _____ |
|---|--|

PERMIT# _____-P

COMMERCIAL OR RESIDENTIAL SWIMMING POOL REQUIRED INSPECTIONS

IT IS MANDATORY TO CALL PLANS EXAMINERS, INC. 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

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 \$80.00 fee per incident.