



ABOVE GROUND POOL/HOT TUB/SPA - PERMIT APPLICATION

Date _____

Permit # _____

APPLICATION IS HEREBY MADE TO: ERECT ABOVE GROUND POOL ____ HOT TUB ____ SPA ____
(All In-ground pools require a building permit and appropriate building inspections)

SIZE of Pool/Tub/Spa (circle): Diameter _____ Height _____ Gallons _____

OWNER NAME (print) _____ PHONE _____

STREET ADDRESS _____ ESTIMATED COST \$ _____

SUBDIVISION _____ Homeowners Assn. Approval Required ____ N/A ____

Site Sketch Attached - including fence/barrier location (REQUIRED) ____ Yes ____ No

Verification that device is UL Approved Attached (REQUIRED) ____ Yes ____ No

	Pool Permit Fee	\$25.00
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CITY OF DE SOTO KANSAS

Pools/Hot Tubs/Spas:

- A. Shall be located at least ten (10) feet from the nearest property line.
- B. A barrier/fence shall be provided in accordance with the City of De Soto Codes at least four (4) feet in height, gates must open outward, be self closing, w/self closing latch on inside & the barrier openings must not exceed four inches.
- C. Must meet UL and ANSI requirements for grounding and or bonding.
- D. Call for Final Inspection on completion. (913) 583-1182 ext.130

I hereby affirm that the above statements are true and correct and I bind myself to comply with all Codes, Ordinances and Zoning pertaining to or governing the erection, construction, repair, alterations, building or use of the land. I understand that the owner/contractor is responsible for determining all required setbacks, easements and utility locations before starting construction.

Signature of Owner/Contractor/or Authorized Agent

Date

Office Use Only

Permit Fee (\$25) Date Paid _____

Permission is hereby : Granted ____ Denied ____ To Proceed with Installation.

Date _____ Building Official _____