

PERMIT #

INGLESIDE ON THE BAY
APPLICATION FOR POOL PERMIT

Date:___ PROJECT ADDRESS:_____ LT:_____ BLK:_____

OWNER OF PROPERTY: _____

MAILING ADDRESS: CITY _____ STATE ___ ZIP PHONE #

CONTRACTOR ADDRESS: CITY _____ STATE _____ ZIP _____ PHONE #

CHECK ALL THAT APPLY

TYPE OF POOL: GUNITE FIBERGLASS _____ VINYL _____ SPA HOT TUB _____ BELOW GROUND
____ ABOVE GROUND BACKWASH TO P-TRAP? YES ___ NO ___ DRAIN TO TWO-WAY CLEANOUT? YES ___
NO ___
POOL HEATER? YES ___ NO ___ GAS ___
ELECTRIC POOL ___ AREA SQ. FT. FILTER

TYPE OF POOL/SPA: ADDITIONAL SUB PERMITS NEEDED:

ABOVE GROUND POOL

ELECTRICAL: YES NO

INGROUND POOL PLUMBING: YES NO

ABOVE GROUND SPA OTHER: _____

INGROUND SPA

BRIEF DESCRIPTION OF WORK:

Building Inspector approval: _____

Permit Issued by: _____

Date Permit issued: _____

**(SITE PLAN MUST BE SUBMITTED
BEFORE APPROVAL)**

SIGNATURE OF OWNER OR CONTRACTOR /AUTHORIZED AGENT _____

*****OFFICE USE
ONLY*****

FEE TOTAL: CHECK # CASH: ONLINE TRANSACTION:

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HOUSE-POOL PROTECTIVE DEVICE INSTALLATION RESIDENTIAL POOL/SPA

The Certification for House-Pool Protection Device Installation form attached is utilized to assist homeowners, contractors, and our Inspectors in conducting the final inspection on residential pool and/or spa permits.

The following steps **must** be completed in order for the form to be accepted:

1. One (1) of the two (2) types of protection devices on **page 2** must be marked and initialed.
2. The homeowner's name must be printed legibly on the appropriate line.
3. The site address must be printed on the appropriate line.
4. The homeowner's signature must be NOTARIZED by a notary.
5. The notary must complete the final section of the document.
6. The form must be in the permit packet at the job site at the time of the Belly Steel & Bond Inspection.

By signing this form, you are authorizing the inspector to bypass entering the residence in order to inspect the door alarms or self-closing and self-latching devices.

The responsibility of complying with the ISPSC pool code regulations is accepted by the homeowner by his/her written certification implemented by this form. You understand that by utilizing this form you have certified compliance with all relevant ISPSC pool code requirements and accept total responsibility for such compliance or non-compliance.

You also understand that by utilizing this form you agree to indemnify and hold the Town harmless from any and all costs, expenses, suits, demands, liabilities or damages, including attorney fees and costs of suit, arising or resulting from compliance or non-compliance with the ISPSC pool code requirements.

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CERTIFICATION OF HOUSE-POOL PROTECTION DEVICE INSTALLATION

This document provides for the homeowner to certify that one (1) of the following protection devices has been installed at a particular address.

_____ 1. All doors leading into the pool area are equipped with an alarm. The alarm sounds continuously for at least thirty (30) seconds or until the alarm is manually reset (if the door closes within the 30 second period, the alarm is manually reset). The alarm is capable of being heard throughout the house during normal household activities. The alarm automatically resets under all conditions. The alarm shall be listed and labeled in accordance with UL 2017. The deactivation switch(s) shall be located at least fifty-four (54) inches above the threshold of the door.

_____ 2. All doors leading from the house into the pool area are equipped with self-closing and self-latching devices. The latch is at least fifty-four (54) inches above the floor.

Based upon this certification, I acknowledge and agree that the Building Official will not enter the residence to inspect the door alarms or self-closing and self-latching devices, and I take full responsibility for compliance with all related International Residential Code requirements. I agree to indemnify and hold the Town harmless from any costs, expenses, suits, demands, liabilities, or damages, including attorney's fees and costs of suit, arising, or resulting from compliance or non-compliance with the ISPSC pool code requirements.

PRINT NAME: _____
(Homeowner)

SIGNATURE: _____
(Homeowner)

Site Address (where protection installed): _____

STATE OF TEXAS
COUNTY OF _____

On this day ____ of _____, in the year _____, before me _____, Notary Public personally appeared _____ personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is (are) subscribed to this instrument and acknowledged that he/she/they executed it.

WITNESS my hand and official seal:

Notary's Signature: _____

Notary's Name (Print): _____

My Commission Expires: _____