CITY OF JOHNSTOWN, OHIO

599 S. Main Street Johnstown, Ohio 43031 Telephone: 740-967-3177



POOL PERMIT APPLICATION: CHAPTER #1171.10

Application Number:	Date:/
FEE:	
Residential - \$50	
Total Fee Amount:\$ Paid: Check #:	/ Cash: _\$
1. Applicant:	Phone: _()
2. Address:City:	State:Zip:
3. Contractor Name:	Phone:_()
4. Existing Use of Property:	
5. Square Footage of Pool:sq. ft. Zoning District:	
6. Yard Dimensions: Front'_Rear'_Left side'_Right side'	
7. Percentage of Lot To Be Covered% Total Square Feet of Lot	
8. Projected Cost of Pool: \$	
Required for Permit: One (1) scaled and dimensioned drawings showing the lot, with location of all existing and the proposed building. Attach any requested, supplemental, or necessary documentation. <u>Contact OUPS Before Digging At #811</u>	
***The undersigned is applying for a Pool Permit to be built or installed; said Permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct.	
Applicant's Signature	Date//
OFFICE USE ONLY:	
Date Received in Office/By:	
Date Permit Issued/By:	
Date of Inspection if Required/By:	