



Plant your family here.

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E-Mail: buildinginspectors@perryvillemo.gov

OFFICE USE ONLY

SUBMITTAL DATE _____

APPROVAL DATE _____

PERMIT # _____

FEES PAID _____

RESIDENTIAL SWIMMING POOL/HOT TUB/SPA PERMIT APPLICATION (2021 ISPSC)

BUILDING ADDRESS: _____ **ZONING:** _____

BUILDING OWNER: _____ **ADDRESS:** _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

CONTRACTOR: _____ **ADDRESS:** _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

(REQUIRED)

TYPE OF PROJECT:

SWIMMING POOL ___ HOT TUB ___ SPA ___

ABOVE GROUND ___ BELOW GROUND ___

SIZE ___ LENGTH ___ WIDTH ___ DEPTH ___ RADIUS

BARRIER PROTECTED? ___ YES ___ NO GFCI PROTECTED? ___ YES ___ NO

DOOR ALARM REQUIRED? ___ YES ___ NO OVERHEAD POWER LINES? ___ YES ___ NO

PROJECT DESCRIPTION (PROJECT MUST MEET REGULATIONS SET FORTH BY THE 2023 ISPSC):

PLAN SUBMITTAL: SITE PLAN ___

PROJECT COSTS: \$ _____ **PERMIT FEE:** \$ _____

I HEREBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS AUTHORIZED AGENT AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. THE CITY OF PERRYVILLE DOES NOT RESEARCH OR ENFORCE HOMEOWNER'S RULES AND REGULATIONS.

SIGNATURE OF APPLICANT

APPLICATION DATE

SIGNATURE OF INSPECTOR

INSPECTION DATE

SEE CITY ORDINANCE FOR TRACER WIRE REQUIREMENTS. ANY MO ONE CALL VIOLATIONS WILL BE ISSUED A CITATION FOR MUNICIPAL COURT, AND THE DIGGER IS LIABLE FOR DAMAGES.

