

# APPLICATION FOR SWIMMING POOL PERMIT



**City of Glendale**  
**Permit Services Center**

MSB, Room 101 633 E. Broadway at Glendale Avenue (818) 548-3200

Permit No. \_\_\_\_\_

Accepted by: \_\_\_\_\_

Receipt No. \_\_\_\_\_

Please print legibly and complete all applicable spaces.

<b>Job Address</b>	<b>Date</b>
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Contractor/Company \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Emergency No. \_\_\_\_\_  
 Contractor's City License No. \_\_\_\_\_ Expires on \_\_\_\_\_  
 State License No. \_\_\_\_\_  
 Workmen's Comp. Expires on \_\_\_\_\_

**PROVIDE PLOT PLAN ON BACK OF THIS APPLICATION**

Private                       Semi-Public

Pool Size \_\_\_\_\_ X \_\_\_\_\_ ft.  
 Est. Capacity \_\_\_\_\_ gallons  
 Type Filter \_\_\_\_\_ Backwash? \_\_\_\_\_  
 (NOTE: Include costs of Labor, Material, Electrical, Heating and Plumbing.)  
 Valuation        \$ \_\_\_\_\_

Owner's Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

**Plumbing Fees**

Pool Heater \_\_\_\_\_ Gas System \_\_\_\_\_  
 Pool Piping \_\_\_\_\_ Other \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Telephone \_\_\_\_\_ Emergency No. \_\_\_\_\_  
 Contractor's City Busn. License No. \_\_\_\_\_ Expires on \_\_\_\_\_  
 State License No. \_\_\_\_\_  
 Workmen's Comp. Expires on \_\_\_\_\_

**FOR STAFF USE ONLY**

Map Bk	Page	Parcel No.	Section Sht
UBC ed.	Lot No.	Block No.	Tract
Zone	Fire Zone	Occupancy	Occ Load

**CONTRACTOR'S EXEMPTION DECLARATION**

I certify that I am exempt from the "License Required" provisions of the Contractor License Law. (State Basis of Exemption)

\_\_\_\_\_

If I should become subject to the Workmen's Compensation provisions of the Labor Code of California, I will forthwith comply with provisions of Sec. 3700 or my permit will be deemed revoked.

\_\_\_\_\_

Date \_\_\_\_\_ Signature of Exempt Individual \_\_\_\_\_

Type of Construction \_\_\_\_\_

Required Setbacks

Front	Right side	Left side	Rear	Special
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Engineering - Easements:

Public Service: Electric \_\_\_\_\_ Water \_\_\_\_\_  
 Distance from face of curb to Property Line \_\_\_\_\_ ft.  
 Hillside Lot     Yes     No

This permit becomes null and void if work is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 90 days at any time after work is commenced. I hereby certify that I have read this application and state that the information is correct. I agree to comply with all City and County ordinances and State laws relating to this type of construction, whether specified herein or not. I hereby authorize representatives of the City to enter upon the above mentioned property for purposes of inspecting the work permitted. "I certify that in the performance of the work for which this permit is issued I shall not employ any persons in any manner so as to become subject to the workmen's compensation laws of California."

Date \_\_\_\_\_

Driver's License No. \_\_\_\_\_

\_\_\_\_\_  
Signature of Contractor or Authorized Agent

# PLOT PLAN

NOTE: Locate all Structures on Lot. Make Bottom of Page the Street Frontage.

