



Community Development & Planning
City of Jasper
 610 Main Street | PO Box 29
 Jasper, IN 47547-0029
 (812) 482-4255 | Fax (812) 482-7852
 www.jasperindiana.gov



POOL WITH FENCE PERMIT APPLICATION

| PART A IDENTIFICATION | |
|-------------------------------|---------------|
| Owner Name | |
| Location (Address) | |
| Legal Description of Property | |
| Contact Name of Owner | |
| Phone Number | Email Address |

| PART B DETAILED INFORMATION | | |
|---|--|---|
| TYPE OF POOL (check one): <input type="checkbox"/> IN-GROUND <input type="checkbox"/> ABOVE-GROUND | DETAILS OF POOL Pool Depth: Minimum Feet: _____ Maximum Feet: _____ | ADDITIONAL INFORMATION Height of Fence Feet: _____ Inches: _____ |

| PART C CHECK LIST AND CONTRACTOR INFORMATION | |
|---|-------|
| General Contractor | Phone |
| Electrical | Phone |
| Plumbing | Phone |
| Gas | Phone |
| Please include a SITE PLAN detailing the following items with your completed application: <input type="checkbox"/> North Arrow <input type="checkbox"/> Lot Size with Dimensions <input type="checkbox"/> Street Names <input type="checkbox"/> All Structures on Property <input type="checkbox"/> Rights-of-Ways <input type="checkbox"/> Location of Pool and Fence with Setback Distances from all Property Boundary Lines | |

Owner's Certificate: *I certify that the information contained in this application and on any accompanying documents is true and correct.*

Applicant's Signature: X _____ Date: _____

| FOR OFFICE USE ONLY | | |
|-------------------------------|------------|---------------|
| Property Zoning | Permit Fee | Permit Number |
| Approval by: Administrator | | Approval Date |