

Polk County Public Works

5885 NE 14th Street Des Moines, IA 50313 Phone: 515-286-3705

Email: publicworks@polkcountyiowa.gov

Swimming Pool Permit Application and Checklist

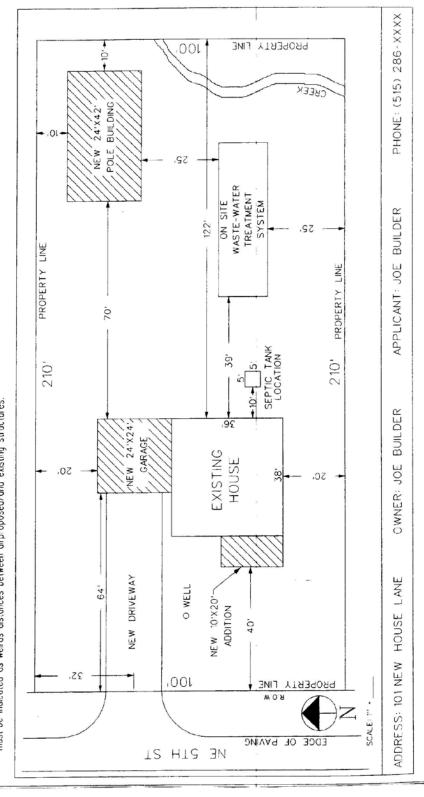
Please Allow 5 – 7 Business Days for Permit Review and Approval

JOB SITE ADDRESS:			
OWNER:		PHONE:	
ADDRESS:	CITY:	STATE:	ZIP:
EMAIL:			
CONTRACTOR:		PHONE:	
COMPANY:		ADDRESS:	
CITY	State:		Zip:
EMAIL:			
Are you building a wood deck around the pool? Additional information (If any): A barrier fence of 4' height minimum with self-	rovide valuation: \$	es, a separate Deck Permit a	
Checklist of items to be filled out or completed Pool permit application and checklist Detailed site plan drawing, showing fence Proposed pool layout staked Stipulations: No construction shall start until the permit All work must be permitted prior to inspect Unresolved zoning, subdivision, floodplain or occupied until the Certificate of Occupa An Electrical Permit must be applied for se	prior to submitting the application t is issued. ctions. and/or health items may delency/Use is issued.	cation packet: ay the issuance of any permit	
Contractor/Owner/Applicant Statement:			
Work must commence within 180 days from pe or the building permit will be null and void. I un installation and that I must call for a final inspe- required in accordance with applicable codes a	nderstand all work must be ir ction. I further understand th	spected and approved by Po	lk County prior to concealing any
I have included all of the above checked items a be issued. I further understand that construction true and correct and to the best of my knowled	on work cannot begin until th		
I affirm I am the owner or licensed contractor of correct and agree to comply with all ordinances			
Print Name	 Signature		 Date

RESIDENTIAL SITE PLAN INSTRUCTIONS

Required Information:

- 1. Specify Site Address and Owner's Name.
- 2. Specify Name and Phone Number of person furnishing Site Plan information.
- 3. All streets must be identified.
- 4. Indicate Lot Dimensions.
- 5. All structures, existing and proposed, must be shown on the Site Plan. Dimensions of and distances to all lot lines from existing/proposed buildings must be indicated as well as distances between all proposed/and existing structures.
- indicate location of and distance to property entrance(s), existing and/or proposed.Dimensions from corner of property to center of drive should be indicated.
 - 7. Indicate location of and distance to existing and proposed septic tank(s) and/or on site waste-water treatment system(s), if possible.
- 8. Indicate location of ponds, streams, drainage ways, and/or ravines. All physical features must be shown.
- 9. Identify North Directional Arrow and indicate scale of site plan.



Polk County Public Works – Detailed Site Plan Drawing

SITE ADDRESS:	+
OWNER'S NAME:	
APPLICANT'S NAME:	+
APPLICANT'S PHONE:	\perp
INSTRUCTIONS TO APPLICANT	
	\Box
Specify Site Address and Owner's Name.	+
Specify Name and Phone Number of person furnishing Site Plan information.	
all streets must be identified.	\perp
Indicate lot dimensions.	\Rightarrow
All structures, existing and proposed, must be shown on the Site Plan. Dimensions of and distances to all lot lines from existing/proposed buildings must be indicated as well as distances between all proposed/and existing structures.	
Indicate location of and distance to property entrance(s), existing and/or proposed. Dimensions from corner of property to center of drive should be indicated.	
Indicate location of and distance to existing and proposed septic tank(s) and/or on site waste-water treatment system(s) and if applicable geothermal heat pumps.	
Indicate location of ponds, streams, drainage ways, and/or ravines. All physical features must be shown.	
Identify North Directional Arrow and indicate scale of Site Plan.	
I, WE CERTIFY THAT THE PROPOSED CONSTRUCTION WILL CONFORM TO THE DIMENSIONS AND USES SHOWN ABOVE AND THAT NO CHANGES WILL BE MADE WITHOUT FIRST OBTAINING APPROVAL.	
APPLICANT'S SIGNATURE	
DATE	+
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	+