

Office of Fire and Bylaw Services

Bob Lymburner blymburner@pelham.ca 905-892-2607 x203

Application for Pool Permit

Application number Permit number (if different): Date received: Roll number: This Application is based on the pool and hot tub requirements and regulations found in the current Town of Pelham Pool and Hot tub By-law which is posted and available for your review on the Towns of Pelhams Website at Pelham.ca Application submitted to: The Town of Pelham Bylaw Department A. Project information Unit number Building number, street name Unit number Municipality Postal code Does this property have an easement? Yes Project value est. \$ Does this property have a septic (if 'yes''see additional requirements on the attache system? Yes No B. Purpose of application New Above-ground Pool New In-door Pool New Public Pool Description of proposed work Instrume Corporation or partnership Lot/con. Street address Unit number Lot/con. Lot/con. Municipality Postal code Province E-mail Company Name Contact Person's first name Contact Person's last name		For Of	fice Use	Only	,				
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B. Purpose of application				ease	ement?Yes 🛛	No 🗖			
B. Purpose of application Checklist. Image: System / Yes Image: Checklist. B. Purpose of application Image: System / Yes Image: Checklist. Image: Checklist. Image: System / Yes Image: Chec	Project value est. \$					1			
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Telephone number Fax Cell number () () () D. Pool Contractor Information Contact Person's first name Contact Person's last name	Street address					Unit number	Lot/con.		
() () D. Pool Contractor Information Company Name Contact Person's first name Contact Person's last name	Municipality	Postal code		Prov	ince	E-mail			
Company Name Contact Person's first name Contact Person's last name	Telephone number ()	Fax ()				Cell number ()			
	D. Pool Contractor Information								
Street address Unit number	Company Name	Contact Perso	on's first na	me	Contact Person's	s last name			
	Street address	I			I	Unit number			
Municipality Postal code Province E-mail	Municipality	Postal code		Prov	ince	E-mail	I		
Telephone number Fax Cell number	Telephone number	Fax				Cell number			
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177 Highway 20 West | PO Box 323 | Fonthill, ON | LOS 1E0 www.pelham.ca



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E. Required Attachments								
i) Attach 2 Sets of Site Plan Drawings (See accompanying checklist sheet for details to be included on drawing)								
H. Completeness and compliance with applicable laws YES N								
 i) I understand that all Electrical wiring must be inspected by the Electrical Safety Authority (ESA). I must file separate Inspection Applications (permits) with the ESA. For More information and to arrange an inspection by an ESA Inspector please call the Electrical Safety Authority at 1-877- 372-7233 or visit their website at <u>www.esasafe.com</u>. 								
ii) I understand his application is to be accompanied by the plans and specifications prescribed by the- By-law, Resolution or Regulation made under clause 7(1)(b) <i>of the Building Code Act, 1992.</i>								
iii) I understand the proposed construction will not contravene any applicable law								
iv) I understand that local and provincial laws mandate that separate and additional building permits may be required for the construction of decking, gazebo's, sheds, covered porches, covered decks, tents and other accessory buildings. I am to contact the Town of Pelham Building Department directly at 905.892.2607 ext. 321 for further information and inquiries. I understand that failure to obtain necessary permits can result in provincial charges, fines and penalties including Orders to remove structures built without a permit.								
I. Declaration of applicant	•	•						
declare that:								
 The information contained in this application plans, specifications, and other attached documen to the best of my knowledge. 	tation is tru	e						
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partne	rship.							
Date Signature								

Personal information contained in this form and schedules is collected under the authority of subsection 8(1.1) of the *Building Code Act, 1992*, and will be used in the administration and enforcement of the *Building Code Act, 1992* and all applicable By-laws. Questions about the collection of personal information may be addressed to: a) the Director of By-law Services of the municipality or upper-tier municipality to which this application is being made, or, b) Director, Building and Development Branch, Ministry of Municipal Affairs and Housing 777 Bay St., 2nd Floor. Toronto, M5G 2E5 (416) 585-6666



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POOL PERMIT CHECKLIST

REQUIRED APPROVALS							
Niagara Escarpment Commission (NEC)				is under NEC			
1-800-263-1035,	Zoning	jurisdiction please contact them prior to submitting this application					
Niagara Peninsula Conservation		If your property is under NPCA					
Authority (NPCA)		jurisdiction please obtain their approval					
(905) 788-3135	Zoning	prior to submitting this application.					
Region of Niagara Works Department	Septic System			has a septic syst			
(905) 685-1571				ten approval fro oposed location			
Planning Department	Minor	pool prior to submitting this application					
(905) 892-2607 ext. 321	Variance/Consent		•				
Building Department	Final						
(905) 892-2607 ext. 344	Grading	\checkmark					
	Approval	Deald					
REQUIRMENTS FOR PERMIT APPLICA	1	Req'd					
Application for Permit	Completed &	\checkmark					
Cita Dian Drawing (2 carries car ha	Signed Showing:						
Site Plan Drawing (2 copies, can be	all existing and/or						
hand drawn, to scale not required). Pool minimum setback requirements :	proposed structures	\checkmark					
1.5 m (4.92 ft) from property line	including house, decks, patios, sheds						
3.0 m (9.84 ft) if rear yard abuts	and fences.						
neighbouring side yard	Pool location: showing distance from	\checkmark					
Pool equipment minimum setback	pool to property lines.						
requirements:	Pool Circulation Equipment showing distance from	" ~					
1.2 m (4 ft) if enclosed	equipment to property						
3.0 m (9.84 ft) if open to air	lines and indicating if						
Fence requirements:	equipment is enclosed						
minimum height 1.5 m (4.92 ft) maximum	within a structure or not Fences and gates :	\checkmark					
height 1.82 m (6 ft)	showing height and						
Solid and safe construction	material of construction						
Gate requirements:	Septic Systems If you have a septic	\checkmark					
Self-closing and latching, same height requirements as fence. Additional	system, Regional						
requirements apply to double gates.	Approval required with						
Pool Permit Checklist	this application.	~					
FEES TO BE COLLECTED AT PERMIT	Completed AMOUNT DUE	► Req'd	Poc'd	Date Paid	Initials		
STAGE	AWOUNT DUE	ney u	Nec u	Date Paid	muais		
Pool Permit Fee	\$ 279.00	\checkmark					
Security Deposit	\$ 500.00	\checkmark					