

## Application for Pool Permit

### For Office Use Only

Application number	Permit number (if different):
Date received:	Roll number:

Application submitted to: **The Town of Pelham**  
(Name of municipality, upper-tier municipality, board of health or conservation authority)

### A. Project information

Building number, street name	Unit number	Lot/con.
Municipality	Postal code	Does this property have an easement? Yes <input type="checkbox"/> No <input type="checkbox"/>
Project value est. \$	Does this property have a septic system? Yes <input type="checkbox"/> No <input type="checkbox"/>	

### B. Purpose of application

- New In-ground Pool     
  New Above-ground Pool     
  New In-door Pool     
  New Public Pool

Description of proposed work

### C. Owner Information

Applicant is: Owner or Authorized agent of owner

Last name	First name	Corporation or partnership
Street address	Unit number	Lot/con.
Municipality	Postal code	Province
Telephone number ( )	Fax ( )	E-mail
Telephone number ( )	Fax ( )	Cell number ( )

### D. Pool Contractor Information

Company Name	Contact Person's first name	Contact Person's last name
Street address	Unit number	Lot/con.
Municipality	Postal code	Province
Telephone number ( )	Fax ( )	E-mail
Telephone number ( )	Fax ( )	Cell number ( )

<b>E. Required Attachments</b>					
i) Attach 2 Sets of Site Plan Drawings					
<b>H. Completeness and compliance with applicable laws</b>			<b>YES</b>	<b>NO</b>	<b>Initials</b>
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 <a href="http://www.esasafe.com">www.esasafe.com</a> .			<input type="checkbox"/>	<input type="checkbox"/>	
ii) This application is accompanied by the plans and specifications prescribed by the applicable by-law, resolution or regulation made under clause 7(1)(b) of the <i>Building Code Act, 1992</i> .			<input type="checkbox"/>	<input type="checkbox"/>	
iii) The proposed construction will not contravene any applicable law			<input type="checkbox"/>	<input type="checkbox"/>	
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.			<input type="checkbox"/>	<input type="checkbox"/>	
<b>I. Declaration of applicant</b>					
<p>I _____            (print name)</p> <p>declare that:</p> <ol style="list-style-type: none"> <li>The information contained in this application plans, specifications, and other attached documentation is true to the best of my knowledge.</li> <li>If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol> <p>_____</p> <p style="text-align: center;"><b>Date</b> <span style="margin-left: 200px;"><b>Signature</b></span></p>					

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

### POOL PERMIT CHECKLIST

REQUIRED APPROVALS		Req'd	Rec'd	Date Rec'd	Initials	
Niagara Escarpment Commission (NEC) <i>Martin Killian: 1-800-263-1035, ext. 4391</i>	Zoning					
Niagara Peninsula Conservation Authority (NPCA) <i>Nicholas Godfrey (905) 788-3135 ext. 278</i>	Zoning					
Region of Niagara Works Department <i>(905) 685-1571</i>	Septic System					
Planning Department <i>(905) 892-2607 ext. 321</i>	Minor Variance/Consent					
Building Department <i>(905) 892-2607 ext. 344</i>	Final Grading Approval	✓				
REQUIREMENTS FOR PERMIT APPLICATION		Req'd	Rec'd	Notes	Initials	
Application for Permit	Completed & Signed	✓				
Site Plan Drawing (2 copies, can be hand drawn, to scale not required). <b>Pool setback requirements:</b> 1.5 m (4.92 ft) from property line 3.0 m (9.84 ft) if rear yard abuts neighbouring side yard <b>Pool equipment setback requirements:</b> 1.2 m (4 ft) if enclosed 3.0 m (9.84 ft) if open to air <b>Fence requirements:</b> minimum height 1.5 m (4.92 ft) maximum height 1.82 m (6 ft) Solid and safe construction <b>Gate requirements:</b> Self-closing and latching, same height requirements as fence, no double gates	<b>Showing:</b> all existing and proposed structures including house, decks, patios, sheds <b>Pool location:</b> showing distance from pool to property lines <b>Pool circulation equipment location:</b> showing distance from equipment to property lines <b>Fences and gates:</b> showing height and material of construction  Location of septic system (also require Region approval letter)	✓  ✓  ✓  ✓  ✓				
Pool Permit Checklist	Completed	✓				
FEES TO BE COLLECTED AT PERMIT STAGE		AMOUNT DUE	Req'd	Rec'd	Date Paid	Initials
Pool Permit Fee	\$ 279.00	✓				
Security Deposit	\$ 500.00	✓				