

ALEXANDER COUNTY INSPECTIONS DEPARTMENT

6125 NC Hwy 16 S Taylorsville, NC 28681 Phone: (828) 632-1000 Fax: (828) 632-1095

SWIMMING POOL, SPA AND HOT TUB APPLICATION

Owners Name _____ Permit Number _____

Address: _____ Phone # _____

JOB DESCRIPTION: _____

Estimated Cost of Project: \$ _____

ALL CONTRACTORS SHALL BE LISTED BELOW BEFORE TRADE INSPECTIONS ARE SCHEDULED

POOL CONTRACTOR

License # _____

Name _____ Phone # _____

Email _____ Address _____

City _____ State _____ Zip _____

ELECTRICAL CONTRACTOR

License # _____

Name (as licensed) _____ Phone # _____

Email _____ Address _____

City _____ State _____ Zip _____

MECHANICAL CONTRACTOR

License # _____

Name (as licensed) _____ Phone # _____

Email _____ Address _____

City _____ State _____ Zip _____

PLUMBING CONTRACTOR

License # _____

Name (as licensed) _____ Phone # _____

Email _____ Address _____

City _____ State _____ Zip _____

PLEASE CONTINUE

<u>DESCRIPTION</u>	<u>(X)</u>	<u>Fee</u>
	Those Permits Needed	
Zoning	_____	\$25.00
Swimming Pool (In Ground)	_____	\$250.00
Swimming pool (Above Ground)	_____	\$70.00
Plumbing permit	_____	\$70.00
Mechanical Permit	_____	\$70.00
Electrical Permit	_____	\$70.00

TOTAL _____

CC / CASH / CK # _____

The undersigned hereby certifies that he/she is either the owner or the authorized agent of the owner and hereby makes application for permit and inspection of work described and agrees to comply with all applicable laws regulating the work.

(Signature)

(Printed Name)

(Date)

Munis App. #: _____

Parcel #: _____