



Town of Kingston Springs
Building and Codes Department
P.O. Box 256
396 Spring Street
Kingston Springs, TN 37082
Office 615.952.2110 Ext 24

APPLICATION FOR SWIMMING POOL PERMIT

Parcel ID# _____

Permit Number:

Expiration Date:

PROPERTY OWNER INFORMATION

Property Owner: _____ Phone: _____

Address: _____ City: _____ State: _____

Zip: _____

PROPERTY INFORMATION

Address: _____

Subdivision Name: _____ Lot#: _____

Sq. Foot: _____ Dimension: _____ Project Value: \$ _____

Brief Summary of Work: _____

CONTRACTOR INFORMATION

Address: _____

City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

SITE PLAN

(may include on separate sheet/attachment)

The site plan must show the following to be accepted:

___ Distance to and location of any critical area, such as stream, creek, river, irrigation ditch or floodplain

___ Street frontage

___ Access/Driveway

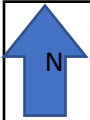
___ Lot lines and dimensions

___ Location of **all** structures and specific use (any new buildings will require building permit)

___ Location of well, septic tank, and drainfield

___ Distances between deck and all property lines

___ Easements and/or right-of-way and any overhead or underground utility lines



I 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.

Signature of Owner/Applicant

SWIMMING POOL AND SPA GUIDELINES

Residential Pool

1. Fill out application
2. Submit site plan (drawing)
3. Submit pool or spa details
4. All electrical work will require proper electrical permit and inspections
5. Requires a four-foot barrier with self-latching gate (audible alarm system may be required)
6. Requires alarms (with audible alarm and separate from home security system) on any door leading from the house to the pool

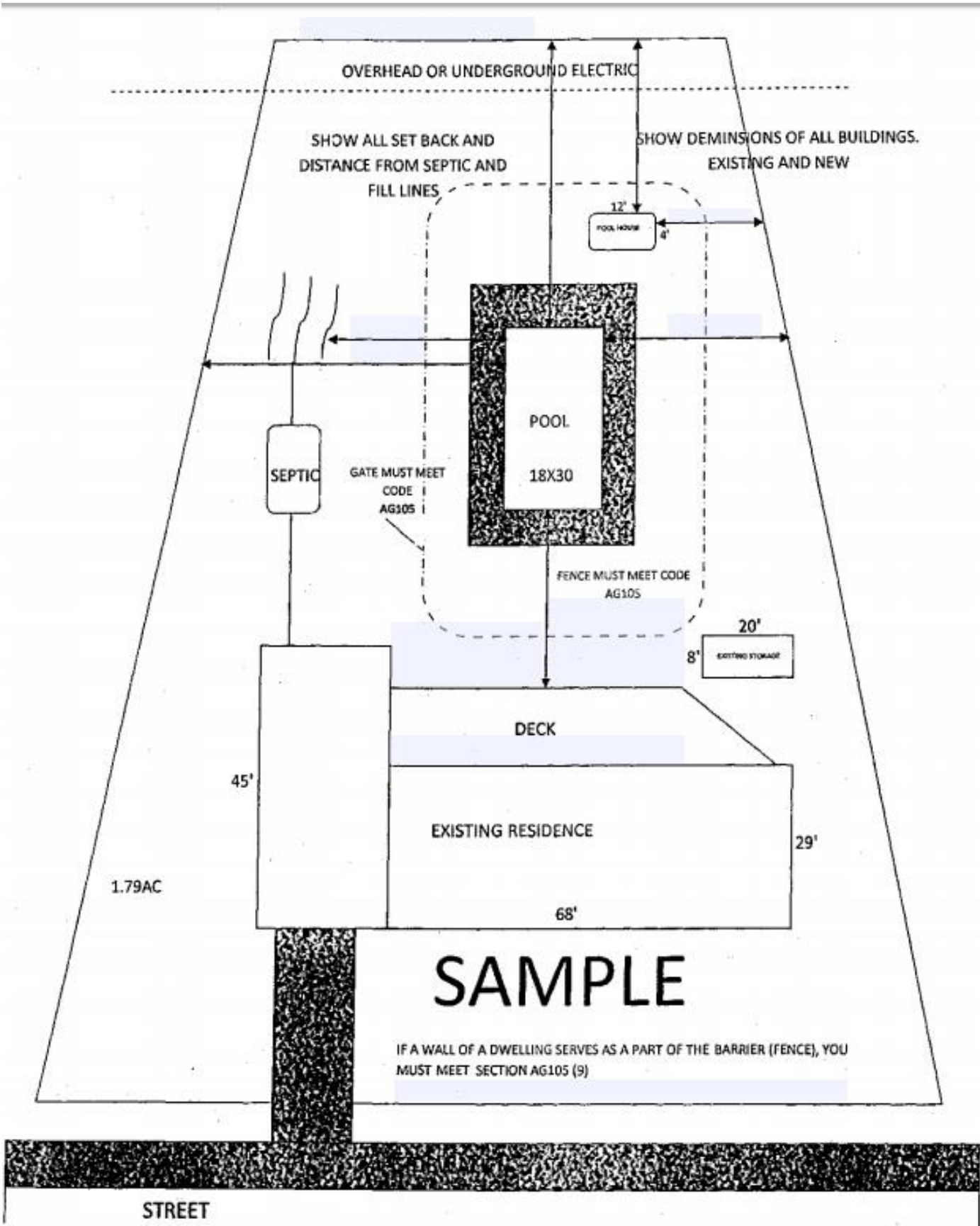
****Please reference Appendix G (2009 edition) of the International Residential Code for fencing, gate, latches, and door alarm specifications. Copy available upon request. ****

Inspections Required

Inspection Request Line (615) 952-2110 ext. 24

1. State Electrical Inspection (Inspection by State of Tennessee)
2. Gas line/gas pressure test (If gas installed/Inspected by local gas provider)
3. Pool/Spa final inspection (Inspection by the Town of Kingston Springs)

****All final inspections are the responsibility of the pool contractor****



OVERHEAD OR UNDERGROUND ELECTRIC

SHOW ALL SET BACK AND DISTANCE FROM SEPTIC AND FILL LINES

SHOW DEMINIONS OF ALL BUILDINGS. EXISTING AND NEW

12'
4'

POOL HOUSE

POOL
18X30

SEPTIC

GATE MUST MEET CODE AG105

FENCE MUST MEET CODE AG105

20'
8'

EXISTING STORAGE

DECK

EXISTING RESIDENCE

45'

29'

68'

1.79AC

SAMPLE

IF A WALL OF A DWELLING SERVES AS A PART OF THE BARRIER (FENCE), YOU MUST MEET SECTION AG105 (9)

STREET

ZONING VERIFICATION

The Zoning Ordinance can be read online at www.kingstonsprings.net

SUBJECT PROPERTY:

ADDRESS: _____

MAP: _____ GROUP: _____ PARCEL: _____

ZONING DISTRICT OF SUBJECT PROPERTY: _____

INTENDED USE OF PROPERTY: _____

Check all that apply:

NEW BUILDING CONSTRUCTION WILL OCCUR

EXISTING STRUCTURE TO BE USED

REMODELING OF EXISTING LOCATION TO OCCUR.

ACCESSORY STRUCTURE ONLY (STORAGE, GARAGE, SWIMMING POOL

DRIVEWAY, ROOF OR FENCE STRUCTURE TO BE CONSTRUCTED

I hereby state that I have read the requirements and permitted uses of the Zoning District listed above and understand their limits.

Applicant Signature

Date

Applicant Printed Name

APPLICANT -DO NOT WRITE BELOW THIS LINE

This zoning verification must be signed by the appropriate Town official before ANY building permits can be approved or issued.

The proposed use for the subject property is appropriate for its current zoning district.

The proposed use for the subject property is NOT appropriate for its current zoning district.

Verified by: _____

Town of Kingston Springs

Date

I hereby certify that all work related to this application will be performed in accordance with all applicable town, and state laws and codes pertaining to building construction, and demolition and the information submitted and contained herein is accurate and correct. I further certify that I am the owner or an authorized agent of the property owner listed in this application, and have authority to make application for work to be performed.

Applicant Signature

Date

Applicant Printed Name

****DOUBLE PERMIT FEES WILL BE CHARGED FOR WORK STARTED PRIOR TO OBTAINING PERMITS****

Permit Fees: \$50.00 Hot Tub (32690)
 \$50.00 Above-Ground (32690)
 \$100.00 Deck Permit x 2 @ \$50.00 each (32690)

Date Paid: _____

Amount Paid: _____

Receipt Number: _____

Office Use Only

Approved/Rejected By: _____

Town of Kingston Springs

Date

Comments: