9830 Confederate Park Road
Lakeside, Texas 76108
(817)237-1234 ext. 303

SWIMMING POOL PERMIT APPLICATION

Permit #	**Residential Commercial (circle one)**
Prefab: Yes or No	

Homeowner's Name:	**Telephone #:**
Address:	**City/State/Zip:**

Contractor's Name:	**Telephone #:**
Address:	**City/State/Zip:**
Company Name:	**License #:**

Plumber's Name:	**Telephone #:**
Address:	**City/State/Zip:**
Company Name:	**License #:**

Electrician's Name:	**Telephone #:**
Address:	**City/State/Zip:**
Company Name:	**License #:**

I, _____ hereby submit this application for a Swimming Pool Application. The property is located at _____ (street address). I have carefully examined the completed application and required support documentation and know the same to be true and correct. The cost of the work to be done under this permit has an estimated value of $_____. I have carefully examined the completed application and required support documentation and know the same to be true and correct. I hereby agree to comply with all provisions set forth by the Town of Lakeside and the State of Texas wherein specified otherwise. I am the owner of the property, or his or her duly authorized agent. I acknowledge that inspections must be made.

_____ Date: _____

Applicant Signature

Description	**Total**
Building Permit Fee	$
Plumbing Permit Fee	$ 60.75
Electrical Permit Fee	$ 49.50
Total Permit Fee	$

Minimum 4' tall fence with self closing/latching gates required

City Staff: _____ Date: _____

Plans Reviewed By: _____ Date: _____

Office Use Only

Date Paid: _____	**Cash: _____**	**Check No: _____**	**Credit Card Authorization No.: _____**