

**RICHLAND TOWNSHIP
322 SCHOOLHOUSE ROAD
JOHNSTOWN, PA 15904
(814) 266-2922 EXT. 221
FAX (814) 266-2024**

APPLICATION FOR PRIVATE SWIMMING POOL

Date:

Date Received:

Property Owner:

Address:

City:

State:

Zip:

Phone:

Alternate Phone:

Applicant Name:

Address:

City:

State:

Zip:

Phone:

Alternate Phone:

Work Location/Site Address:

Contractor:

Phone:

Address:

City:

State:

Zip:

Richland Twp Contractor's License #

PA Contractor's License #

Workers Compensation Company:

Policy No:

Liability Insurance Company:

Policy No:

Pool Information

Above Ground

In Ground

Other (Explain

)

Size:

Depth:

Description Of Required Six (6) Foot Enclosure:

SITE PLAN (DRAWN TO SCALE)

Height Of Pool & Fence W/ Information On Any Gate To Pool Or Folding Steps

Show Exact Size And Shape Of Lot With Dimensions

Exact Size And Location Of Existing Structure(s) With Dimensions Stated

Show Exact Location Of Proposed Pool, Walkway, And Decking On The Premises With Dimensions Stated And Distances From All Property Lines.

Show Exact Location Of Required Six Foot Enclosure

Indicate Streets, Alleys, Easements, Public Right Of Ways, Etc.

Information On Electrical Installation (I.E. How It Is Grounded, Etc.)

Pool Construction Cost:

Decking Cost (If Applicable):

Total Cost of Job:

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF THE RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT AND I AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. IN ADDITION, IF A PERMIT FOR WORK DESCRIBED IN THIS APPLICATION IS ISSUED. I CERTIFY THAT THE CODE OFFICIAL OR CODE OFFICIAL'S AUTHORIZED REPRESENTATIVE SHALL HAVE THE AUTHORITY TO ENTER AREAS COVERED BY SUCH PERMIT AT ANY TIME REASONABLE HOUR TO ENFORCE THE PROVISIONS OF THE CODE(S) APPLICABLE TO SUCH PERMIT.

Signature Of Applicant: _____ Date: _____

This Box For Office Use Only:

Review: \$ _____

PERMIT# _____

Inspections: \$ _____

PA UCC: \$ 4.50

Total: \$ _____

Richland Township Zoning Officer

Date: _____

Reason If Denied: _____

COMMENTS: _____