

# Application for a Swimming Pool

| For use by Principal Authority |                               |
|--------------------------------|-------------------------------|
| Application number:            | Permit number (if different): |
| Date received:                 | Roll number:                  |

Application submitted to: Town of Fort Erie

| A. Project information       |             |                                |          |
|------------------------------|-------------|--------------------------------|----------|
| Building number, street name |             | Unit number                    | Lot/con. |
| Municipality                 | Postal code | Plan number/other description  |          |
| Project value est. \$        |             | Area of work (m <sup>2</sup> ) |          |

| B. Purpose of application                  |   |                                  |
|--|---|----------------------------------|
| Above Ground Pool <input type="checkbox"/> | In Ground Pool <input type="checkbox"/> | Hot Tub <input type="checkbox"/> |
|  |   | Without a locked cover           |

| C. Applicant                                      |               |  |          |
|---|---------------|--|----------|
| Applicant is: <input type="checkbox"/> % Owner or |               | <input type="checkbox"/> Authorized agent of owner |          |
| Last name   | First name    | Corporation or partnership                         |          |
| Street address                                    |               | Unit number  | Lot/con. |
| Municipality                                      | Postal code   | Province   | E-mail   |
| Telephone number<br>(    )                        | Fax<br>(    ) | Cell number<br>(    )                              |          |

| D. Owner (if different from applicant) |               |                            |          |
|--|---------------|----------------------------|----------|
| Last name                              | First name    | Corporation or partnership |          |
| Street address                         |               | Unit number                | Lot/con. |
| Municipality                           | Postal code   | Province                   | E-mail   |
| Telephone number<br>(    )             | Fax<br>(    ) | Cell number<br>(    )      |          |

| I. Declaration of applicant  |  |
|--|--|
| <p>I _____ declare that:</p> <p style="margin-left: 40px;">(print name)</p> <ol style="list-style-type: none"> <li>1. The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.</li> <li>2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.</li> </ol> <p style="margin-top: 20px;">Date _____ Signature of applicant _____</p> |  |

