



APPLICATION FOR POOL PERMIT

City of Adelanto

Development Services Departments

POOL PERMIT (PP)

INSTRUCTIONS TO APPLICANT

The applicant must complete the attached form as prescribed, and all of the following information must be attached before it can be accepted for filing and processing by the Department of Planning.

- a) Application fee of \$390 – Checks shall be made payable to City of Adelanto.
- b) Application processing time is Four (4) Business Weeks – Processing time does not include weekends, City Holidays, alternating closed Fridays, or any other day that City Hall is closed.
- c) Plot Plan – 4 copies of a plot plan shall be submitted (along with an 8 ½” x 11” or 11” x 17” reproducible copy), shall be drawn neatly and accurately to scale (not smaller than 1 inch equals 100 feet), and shall show the following data:
 1. All property boundaries and abutting streets;
 2. All existing and proposed buildings, structures, fences, walls, driveways, and parking areas showing number and location of parking spaces;
 3. Proposed pool footprint with setbacks and depths.
 4. The following statement appear on the plot plan: “Gates-Fences and door alarms are the sole responsibility of the swimming pool contractor, all barriers shall comply to the 2001 C.B.C. Appendix Chapter 4, Section 421, I.R.C. Chapter 41, Section E4101”
- d) All Sections of this application must be filled out and signed: Including the **Application, Owner Statement, Authorized Agent Statement (if applicable), Subcontractor List, Disposal Plan, and Grading Permit.**

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ADDITIONAL INFORMATION TO THE APPLICANT

City Code requires that every Pool installed must have a Building Permit and before Permits may be issued the Pool Project must be reviewed by the Departments of Planning, Engineering, and the Building for design standards and safety.

Procedure by the Development Services Departments

The City of Adelanto Department of Planning is located at 11600 Air Expressway, P.O. Box 10, Adelanto, CA 92301, (760) 246 -2300 x 3036, FAX (760) 246 - 3406. Application received after 11:00 am shall be considered received on the following business day.

Department staff shall:

1. Time Stamp the Application if Complete
2. Login the Application in to the Department's Master Log
3. Automatically assigned a case number:
 - a. Acquire the next available Street Address Assignment Case Number from the Street Address Assignment Application Log Book
 - i. Format for Case Number is as follows: PP-(xx)-(yyy)or, where xx is the two digit year, yyy is the number of the application submitted year-to-date.
4. Receipt the Applicant for the application, with case number, and monies received.
5. Planning Department shall review the plan for setbacks
6. Public Works Engineering Department shall review for drainage and grading and issue grading permit
7. Building Department shall review the application and plans prior to the issuance of any permit.

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CASE NO. _____

DATE FILED

Planning Fees:	\$15.00
Engineering Fees:	\$30.00
Grading Permit Fee:	\$30.00
<u>Building Fees:</u>	<u>\$315.00</u>
Total Due:	\$390.00

Total Fees Paid _____ Receipt No. _____

-----City Use Only Above this Line-----

Name of Applicant/Home Owner		Phone	
Address			
City	State	Zip Code	
Name of Pool Company		Phone	
Address			
City	State	Zip Code	

[Applicant must be the owner of the land, the lessee having a leasehold interest of not less than three (3) years, or the agent of the foregoing, duly authorized in writing.]

One of the following property descriptions must be filled out:

A):

Assessors Parcel Number (APN) and Tract Number - Lot Number

OR

B): The EXACT legal description of said property is: (the legal description may be given as tract lots, including Section, Township, and Range, or it may be described by metes and bounds with a point of beginning that can be identified on the City Engineer's maps).

Total Cubic Yards of Pool to be Excavated: _____ CY

Estimated Value of Improvements: \$ _____

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The following statement must be signed in front of a Notary and original Notary acknowledgement attached to this document, or signed in front of City of Adelanto Staff.

I/We _____
(Please Print)

being first duly sworn, each for himself or herself, deposes and says that I/we am/are the owner(s) /lessee /agent of the property involved in this application and that the foregoing statements herein contained and the information herein submitted, are in all respects true and correct to the best of my knowledge and belief.

Signature of Applicant: _____
(if different from owner)

Signature of Owner:					
Mailing Address:					
City		State		Zip Code	
Phone (H)			Phone (W)		

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LETTER OF AUTHORIZATION
IF APPLICANT OTHER THAN PROPERTY OWNER

I, _____, as owner(s) of property identified as Assessor's Parcel
Property Owner(s)

No(s). _____ and/or Tract/Parcel Map _____, Parcel/Lot

No. _____ do hereby authorize _____ to represent me
Authorized Agent

as agent in seeking approval of the following project(s): _____

Owner and Authorized Agent also acknowledge that:

“Gates-Fences and door alarms are the sole responsibility of the swimming pool contractor, all barriers shall comply to the 2001 C.B.C. Appendix Chapter 4, Section 421, I.R.C. Chapter 41, Section E4101”

Signed _____
Property Owner(s)

Date: _____

Signed _____
Authorized Agent

Date: _____

NO APPLICATION FROM AN INDIVIDUAL OTHER THAN THE PROPERTY OWNER WILL BE ACCEPTED UNLESS THIS DOCUMENT, OR A SIMILAR DOCUMENT, IS COMPLETED, SIGNED AND SUBMITTED AS PART OF THE PROJECT APPLICATION.

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City of Adelanto

Development Services Departments
 11600 Air Expressway • P.O. Box 10
 Adelanto, CA 92301
 (760) 246 -2300 • FAX (760) 246 -3242

Swimming Pool Subcontractors List

Job Address: _____ Permit No: _____

I acknowledge receipt of this document concerning the project referenced above. I understand that it is to be completed and verified by the Department of Building and Safety prior to scheduling final inspection.

 Owner/Applicant

Type of Work	Firm Name	Address				State License	City License
C-08 Cement							
C-10 Electrical Wiring							
C-12 Excavating							
C-13 Fencing							
C-29 Masonry							
C-35 Plastering							
C-36 Plumbing							
C-50 Reinforcing Steel							
C-53 Swimming Pool							
C-54 Tile, Ceramic							
C-61 Ltd. Specialties:							
G-06 Gunite							

I certify that to the best of my knowledge the subcontractor information provided herein is true and correct. I acknowledge that I have agreed to supply the Department of Building and Safety with the names and addresses of all subcontractors for the construction project herein referenced. I also acknowledge that if I fail to supply the names and addresses of said contractors and/or said subcontractors fail to obtain a City business license, final inspection of the project will not be scheduled.

General Contractor: _____ Phone No: _____

Address: _____

State License No: _____ City License No: _____ Exp. Date: _____

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Pool Excavation Disposal Plan

Pool Location

Address: _____
Tract: _____ Lot: _____ APN: _____
Owner: _____ Contact No: _____
Date of Excavation: _____

Type of Material to be Removed: Dirt Grass Concrete
Other _____

Contractor Information

Contractor: _____ Contact No: _____
Address: _____
City of Adelanto Business License No: _____ Expiration Date: _____

Clean Fill Dirt Location

I, (Please Print) _____, as the property owner at _____
APN: _____
hereby authorize clean fill dirt in the amount of _____ yards to be dumped on this property.
Contact No: _____
Signature: _____ Date: _____

Grass/Concrete/Other Location

I, (Please Print) _____, as the property owner at _____
APN: _____
hereby authorize grass/concrete/other in the amount of _____ yards to be dumped on this property.
Contact No: _____
Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Verified and approved by: _____ Date: _____
Permit Number: _____ Notes: _____



City of Adelanto
 11600 Air Expressway
 Adelanto, California 92301
 (760) 246 – 2300

POOL GRADING PERMIT

Public Works Engineering Department No.

Project Address _____
 A.P.N. _____ Zoning _____ C.U.P _____ L.D.P. _____
 Acreage _____ Location _____

Owner _____ Telephone Number _____
 Address _____ City, State _____ Zip Code _____

Contractor _____ Telephone Number _____
 License No. _____ License Class _____
 Address _____ City, State _____ Zip Code _____
 Architect or Engineer _____ Telephone No. _____
 Address _____ City, State _____ Zip Code _____

Workers Compensation Declaration

I hereby affirm that I have a certificate of consent to self insure or a certificate of Workers Compensation Ins., or a certified copy thereof (Sec 3800, Lab C.)

Policy No. _____ Company _____
 Date _____ Owner: x

Certificate of Exemption From Workers Compensation Insurance

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to Worker Compensation Laws.

Licensed Contractors Declaration

I hereby affirm that the contractor being used is licensed under provisions of Chapter 9 (commencing with Section 7000) at Division 3 of the Business and Professions Code and that the license is in full force and effect.

Lic. No. _____ Lic. Class _____
 Contractor _____ Date _____

The Owner Agrees that he shall assume sole and complete responsibility for job site conditions during the course of construction of this project, including safety of all persons and property; that this requirement shall apply continuously and not be limited to normal working hours; and that the Owner shall defend, indemnify and hold the City of Adelanto harmless from any and all liability, real or alleged, in connection with the performance of work on this project.

CUT	+	FILL	=	TOTAL	
_____		_____		_____	Comments
Comments					

Owner or Owner Representative Signature _____ Date _____

Grading Permit Issued _____
 Engineering Dept Signature _____ Date _____

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