



Development Services Department
 300 N. Loraine / PO Box 1152 Midland, TX 79707
 Office: 432-685-7390 / Fax: 432-686-1609

Swimming Pool

PERMIT APPLICATION

Project Address:		Valuation Of Job: \$	
Project Description:			
Type of Work: New <input type="checkbox"/> Alteration <input type="checkbox"/>		Usage: Residential <input type="checkbox"/> Commercial (includes apartments and hotels) <input type="checkbox"/>	
Property Line Setbacks: Front _____ Side _____ Rear _____ Buildings _____		Property Easements: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Autofill: Yes <input type="checkbox"/> No <input type="checkbox"/> <i>(If yes backflow testing required)</i>		Filter Type:	
Drain Count:		Skimmers:	Heating: Electric <input type="checkbox"/> Gas <input type="checkbox"/> N/A <input type="checkbox"/>
Pool Area:	Max Depth:	Deck Area:	Yard Area:
Water Supply Source: _____ Supplier: _____ Onsite Water Well: _____			
Sanitary Sewer: City <input type="checkbox"/> Septic <input type="checkbox"/> N/A <input type="checkbox"/>		Location: Above Ground <input type="checkbox"/> In-Ground <input type="checkbox"/>	
Relocating: Gas <input type="checkbox"/> Underground Electric <input type="checkbox"/> Sewer <input type="checkbox"/> Other _____ <i>Requires separate permits</i>			
2. BUILDING OWNER INFORMATION			
Name:	Address:		City/State/Zip:
Phone:	Email:		
3. CONTRACTOR INFORMATION			
Name:	Address:		City/State/Zip:
Phone:	Email:		
4. SUBCONTRACTOR INFORMATION			
Plumbing:	Electrical:		Backflow Tester:
5. PLEASE READ CAREFULLY			
<ul style="list-style-type: none"> ➤ Be advised incomplete applications may be rejected, denied or cause permit processing delays. ➤ Has a Site Plan been completed? Yes _____ No _____ NR _____ (attach documentation). ➤ Has Site Plan been stamped by ONCOR? (Required) Yes _____ No _____ (attach documentation) ➤ Has a Bond Form been provided? Yes _____ No _____ NR _____ (attach documentation). ➤ This permit becomes null and void if work authorized is not commenced within 180 days of issuance or if work is suspended or abandoned for a period of 180 days at any time after work is commenced. ➤ I hereby certify that I am the property owner or their authorized agent, and have the owner's consent to apply for the permit requested and receive all subsequent communications and business related to this application. I further certify that the information provided is true and correct to the best of my knowledge. This work shall comply with all provisions of laws and ordinances, whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any federal, state or local law regulating construction or the performance of construction. 			
Signature of Applicant:		Date:	
Printed Name of Applicant:		Phone:	
Email:		Fax:	