

Office use only

Permit no.:

Site address	Date
Tenant/building name	Suite/unit no.
Applicant is <input type="checkbox"/> Architect/engineer <input type="checkbox"/> Contractor <input type="checkbox"/> Owner	Condominium no.

Property owner

Name		Phone	
Address	City	State	Zip

Contractor

Name			
Address	City	State	Zip
Phone	Cell phone	License no.	

Architect/engineer

Name			
Address	City	State	Zip
Phone	Cell phone	Registration no.	

Class of work

- Check only one.*
- | | |
|-------------------------------------|---|
| <input type="checkbox"/> 1 New | <input type="checkbox"/> 3 Alteration/remodel |
| <input type="checkbox"/> 2 Addition | <input type="checkbox"/> 4 Maintenance/repair/replace |

Type of structure

- Check only one.*
- 01 Single-family residential
 - 02 Single-family connected to single-family
 - 32 Multiple-family residential
 - 42 Hotels, motels
 - 45 Recreational, amusement

Project details

Job valuation \$ _____

Description of work to be done _____

Estimated completion date _____

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Use of principal structure

Check only one.

Single-family

Multiple-family

Commercial

Townhouse

Type of pool/spa

Check appropriate box.

Swimming pool

Above ground

Below ground concrete

Below ground concrete with vinyl liner

Spa/hot tub

Above ground wood

Above ground fiberglass

Below ground fiberglass

Below ground concrete

Miscellaneous pools

Wading pool

Other _____

Area of pool/spa

_____ Square feet

Please read and sign

I hereby apply for a pool/spa permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Bloomington and with the Minnesota Building Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of all work which requires review and approval of plans.

Applicant's printed name

Applicant's signature

Date

Do not write below this line

Inspector no. _____ Case no. _____

Conditions of issuance _____

Planning approval? Yes No

Engineering approval? Yes No

Valuation \$ _____

Plan check fee? Yes No

Other fees? Yes No Describe _____ Amount \$ _____

Permit approved by _____ Date _____