

# SWIMMING POOL PERMIT APPLICATION

Hardee County Building Department, 401 West Main Street, Wauchula, FL 33873-2832 -- (863) 773-3236

**PERMITS WILL NOT BE ISSUED WITHOUT CURRENT LICENSE/GENERAL LIABILITY AND WORKER'S COMP INS**

DATE \_\_\_\_\_

Permit No. \_\_\_\_\_

Parcel ID. \_\_\_\_\_

Pool Permit Fee \$ \_\_\_\_\_

Plan Review Fee/specs \$ \_\_\_\_\_

Electrical Fee \$ \_\_\_\_\_

Copies \$ \_\_\_\_\_

Surcharge (3% or min of \$4) \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

**\*\*\*\*ALL FEES ARE NON-REFUNDABLE BY RESOLUTION OF THE BOARD OF COUNTY COMMISSIONERS\*\*\*\***

ALL WORK MUST BE IN COMPLIANCE WITH THE 2014 EDITION OF THE FLORIDA BUILDING CODE AND THE 2011 NATIONAL ELECTRICAL CODE

Property Owner Name _____		Phone _____	
Physical Address _____			
Mailing Address _____			
License Holder Name _____		Phone _____	
Company Name _____		License No. _____	
Address _____		Email _____	
SETBACKS: Front: _____ Sides: _____ Rear: _____			
Type and Size of Pool: _____			
Project Value: \$ _____			
<p><b>WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.</b></p> <p><b>APPLICATION:</b> is hereby made to obtain permits to do the work and installations as indicated herein and on supporting plans. I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws and ordinances regulating construction and zoning. I understand that separate permits must be secured for signs, driveways, pools, electrical, plumbing, air conditioners, furnaces, boilers, heaters, gas tanks, and wells, etc.</p>			
<p><b>OWNER'S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGARDING CONSTRUCTION AND ZONING.</b></p> <p>_____ INITIAL</p>			
_____ Print Name of Contractor or Authorized Agent (if Agent, notarized letter of authorization required)		_____ Signature	_____ Date
_____ Print Name of Property Owner (if Owner-Builder)		_____ Signature	_____ Date

STATE OF FLORIDA

COUNTY OF HARDEE

Before me, the undersigned, appeared \_\_\_\_\_

On this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_  
Who affirmed that he/she read and understood the foregoing and who signed the same freely and voluntarily and who is personally known to me ( ) or who produced \_\_\_\_\_ as identification.

Signature of Notary Public

