City of MARSHALL TEXAS

Swimming Pool / Spa Permit Application

401 S. Alamo St., Marshall, TX
PO Box 698, Marshall, TX 75671
P: (903) 935-4455 Fax: (903) 935-4409

Permit #: _____		Date: _____	
Plans Provided:	❑ Yes	❑ No	
Electric:	❑ Reg	❑ Not Reg	❑ Lic exp
Plumbing	❑ Reg	❑ Not Reg	❑ Lic exp
General:	❑ Reg	❑ Not Reg	❑ Lic exp

THIS APPLICATION IS FOR THE CONSTRUCTION OF COMMERCIAL OR RESIDENTIAL SWIMMING POOLS, SPAS

❑ Pool   ❑ Spa   ❑ Splash Zone   **❑ Commercial   ❑ Residential**   ❑ Heated   ❑ Unheated

Is the pool area fenced?   ❑ Yes   ❑ No   If yes, height_____   Type_____

Job Address: _____

Property Legal Description: Subdivision: _____

Lot: _____   Block: _____   Lot Size: _____   <mark>Total valuation of work</mark>: _____

Description of work: _____

Setbacks: (measured from excavation perimeter)   Structures w/ foundations_____   Left Side_____

Rear_____   Right Side_____

Residential Only
Please check one of the following informing us that you have designed the pool, spa and/or splash zone using the correct ANSI/NSPI standard:

❑ In ground pool only ANSI/NSPI-5   ❑ Above ground pool only ANSI/NSPI-4   ❑ Portable Spa
❑ In ground pool and spa ANSI/NSPI-3 and 5   ❑ Permanent Spa ANSI/NSPI-3   ❑ Splash Zone

Contact person: ❑ Applicant   ❑ Property Owner   ❑ Contractor

Name of applicant _____   Phone _____

Email _____

Property Owner

Name _____   Phone _____

Address _____   City _____   State _____   Zip _____

Contractor

Name _____   Phone _____

Address _____   City _____   State _____   Zip _____

Fax_____   E-mail _____

Electric   <mark>Valuation of Electric Work</mark>: _____

Name _____   Phone _____

Address _____   City _____   State _____   Zip _____

Plumbing   <mark>Valuation of Plumbing Work</mark>: _____

Name _____   Phone _____

Address _____   City _____   State _____   Zip _____

Commercial swimming pool, spa or splash zone must also apply for a Health Permit prior to opening to the public and annually thereafter.

I hereby certify that I have the authority to make the necessary application; that all information in this application is correct and all work will comply with the most recently adopted International Building Codes and all other applicable state and local laws, ordinances, and regulations.

Applicant / Agent Name (PRINT)_____

Applicant / Agent Signature _____   Date _____

COMPLETE BACK SIDE OF APPLICATION

Revised 10/12

Certification of House-Pool Protective Device Installation

| Existing Permit #: _____ | Date: _____ |

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I certify that I am the homeowner at [address] _____and that one of the following swimming pool protection devices have been/will be installed between all doors leading from the house and garage into the swimming pool area at or before the pool deck and bond inspection (initial one or both if provided).

_____ 1.   The homeowner chooses not to use this form, I understand an inspector will need to enter the residence in order to verify the door alarm or self-latching device. Two or more failed inspections may result in re-inspection fees.

_____ 2.   All doors with direct access to the pool are equipped with an alarm that sounds continuously for at least thirty (30) seconds, after the door and its screen, if present, are opened. It must be capable of providing audible warning level capable of being heard throughout the house during normal household activities. The alarm shall automatically reset under all conditions and be equipped with a manual means, such as a touch pad or switch, to temporarily deactivate the alarm for a single opening. Such deactivation shall last no longer than (15) seconds. The deactivation device shall be located at least 54 inches above the threshold of the door.

_____ 3.   All doors leading into the pool area are equipped with self-closing self-latching devices. The self-latching device is installed a minimum of fifty-four (54) inches above the immediate floor. These devices shall be subject to approval by the City of Marshall Building Inspections Department.

Print name of homeowner_____

Signature of homeowner _____