The City of Canal Winchester
Development Department
45 E. Waterloo Street
Canal Winchester, Ohio 43110
Phone (614) 837-7501 Fax (614) 837-0145

APPLICATION FOR RESIDENTIAL SWIMMING POOL

☐ Above Ground ☐ In-Ground

PERMIT NUMBER: _____

PROPERTY OWNER

Name _____

Address _____

Phone _____ Email _____

APPLICANT

Name _____

Address _____

Phone _____ Email _____

Address of Subject Property _____

Subdivision _____ Lot# _____ Parcel ID _____

Township _____ Estimated Cost $_____

RESTRICTED ACCESS (Does the property currently have a fence?) Yes ☐ No ☐

IMPERVIOUS SURFACES

Principle Structure _____ Deck/Patio _____ Swimming Pool _____ Other _____

Attach a current plot map showing the location of the proposed swimming pool along with information on any existing fencing or proposed fencing. Provide two (2) copies of the manufacturers recommended installation instructions for the swimming pool and indicate any electric and or natural gas connections. Additional information may be required to determine compliance with the Zoning Code by the Planning and Zoning Administrator.

I certify that the information provided with this application is correct and accurate to the best of my ability.

_____ _____
Property Owner's or Authorized Agent's Signature **Date**

DO NOT WRITE BELOW THIS LINE

Date Received: ____ / ____ / _____ Date Received: ____ / ____ / _____

Date Approved: ____ / ____ / _____ Date Approved: ____ / ____ / _____

_____ _____
Zoning Official Issuing Authority

Inspection line (614) 834-5104. Please allow 48 hours for all inspections