

**SWIMMING POOL APPLICATION
CITY OF HERNANDO, MS**

Contractor: _____
 Address: _____
 Phone #: _____
 License #: _____

Permit #: _____
 Receipt #: _____
 Check #: _____
 Cash: _____

Job-Site (Owner): _____
Address: _____
Subdivision: _____
Lot #: _____
Phone #: _____

Pool Size: _____ x _____ In-Ground () Above-Ground ()
 Total Sq. Footage: _____
 Depth: _____
 Total Cost of Pool: _____

Fee Schedule	Unit	Fee	Total
Public Pool	_____	\$330.00	_____
Private Pool	_____	\$110.00	_____
Heater (Each)	_____	\$ 26.50	_____
Gas Piping (Each Outlet)	_____	\$ 4.40	_____

YOU MUST CALL FOR AN INSPECTION WHEN THE SWIMMING POOL IS COMPLETED! _____
 Please initial

I, THE UNDERSIGNED, CERTIFY THAT THE DESCRIBED WORK ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I ACKNOWLEDGE THAT ANY PERMIT GRANTED ON THE REPRESENTATION HEREIN MADE, MAY BE REVOKED AT ANY TIME, WITHOUT NOTICE, ON A BREACH OF REPRESENTATION OR VIOLATION OF THE CODES THAT REGULATE POOLS.

YOU MUST HAVE A FENCE IN ORDER TO BE APPROVED FOR A SWIMMING POOL PERMIT. _____
 Please initial

Date: _____ Applicant's Signature: _____
 If construction of swimming pool is not started in six (6) months, this permit is void and must be renewed!

Approved By: _____
 Building Official

 Director of Planning Department