



# BUILDING PERMIT APPLICATION POOLS and SPAS

Public Works Department  
25 Oak Drive • Lake Jackson, TX 77566  
Inspection Line (979) 415-2432 • Phone (979) 415-2430 • www.lakejackson-tx.gov

**THIS COMPLETED APPLICATION MUST BE ACCOMPANIED BY THE PLUMBING SUBMITTAL CHECKLIST WITH ALL REQUIRED DOCUMENTS INCLUDING THE CROSS CONNECTION CONTROL SURVEY.**

Type of Permit: Check all that apply  COMMERCIAL  RESIDENTIAL  NEW SYSTEM  ALTERATION/REPAIR  
 POOL  SPA

Project Address: \_\_\_\_\_ Parcel ID #: \_\_\_\_\_

Project Description/Scope of Work: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### POOL/SPA INFORMATION

Commercial Project Valuation: \_\_\_\_\_ Pool Construction Type: \_\_\_\_\_

Pool Capacity: \_\_\_\_\_ Gal. Pool Size: \_\_\_\_\_ Sq Ft Pool Dimensions: \_\_\_\_\_ Ft x \_\_\_\_\_ Ft Pool Depth: \_\_\_\_\_ Ft

Pool Setbacks: Rear \_\_\_\_\_ Ft Left Side \_\_\_\_\_ Ft Right Side \_\_\_\_\_ Ft Type of Pool:  In Ground  Above Ground

Is Pool/Spa Heated:  Yes  No If Yes, Type of Heating System: \_\_\_\_\_

Size of Pool/Spa Heater: \_\_\_\_\_ BTU Provide Gas Pipe Sizing Calculations accounting for existing plus proposed gas usage.

**2 lb gas pressure sets prohibited unless approved by the Building Official in accordance with Municipal Code Section 14-128**

Type of Filtration: \_\_\_\_\_ Salt Water Pool:  Yes  No

**ALL POOLS DRAIN TO STREET. POOLS MAY NOT DRAIN TO SANITARY SEWER OR DIRECTLY TO DRAINAGE DITCHES.**

Pool Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

FOR STAFF USE ONLY

### Reviewed and Approved for Construction

INITIALS: \_\_\_\_\_ DATE: \_\_\_\_\_ Permit #: \_\_\_\_\_

\$ \_\_\_\_\_  
Building Permit Fee

\$ \_\_\_\_\_  
Plumbing Fee

\$ \_\_\_\_\_  
Mechanical Fee

\$ \_\_\_\_\_  
Electric Fee

\$ \_\_\_\_\_  
TOTAL PERMIT FEES

**ALL CONTRACTORS MUST BE REGISTERED WITH THE CITY OF LAKE JACKSON.  
MECHANICAL-ELECTRICAL-PLUMBING CONTRACTORS MUST BE LICENSED AND INSURED.**



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## POOLS and SPAS

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**Plumbing Contractor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Contractor's License Number:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

**Service Size:** \_\_\_\_\_ **Meter Size:** \_\_\_\_\_ **Service Pressure:** \_\_\_\_\_ **Distance to Furthest Remote Outlet:** \_\_\_\_\_

**Please List quantity of fixtures below:**

\_\_\_\_\_ DRAIN                      \_\_\_\_\_ SUMP                      \_\_\_\_\_ BACKFLOW PREVENTOR                      \_\_\_\_\_ WATER PIPING  
 \_\_\_\_\_ WATER HEATER                      \_\_\_\_\_ GAS OUTLETS

**Mechanical Contractor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Contractor's License Number:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

**Please List Quantity of Fixtures Below:**

\_\_\_\_\_ POOL HEATER < 100K BTU                      \_\_\_\_\_ POOL HEATER > 100K                      \_\_\_\_\_ GAS WATER HEATER  
 \_\_\_\_\_ MOTOR UP TO 5 TON                      \_\_\_\_\_ MOTOR >5 UP TO 10 TON                      \_\_\_\_\_ MOTOR >10 UP TO 50 TON  
 \_\_\_\_\_ MOTOR > 50 TON                      \_\_\_\_\_ BOILER                      \_\_\_\_\_ ALL OTHER UNITS

**Electrical Contractor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Contractor's License Number:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

**Please List Quantity of Fixtures Below:**

\_\_\_\_\_ ELECTRIC OUTLET 120 VOLT                      \_\_\_\_\_ ELECTRIC OUTLET 240 VOLT                      \_\_\_\_\_ ELECTRIC OUTLET - GFCI  
 \_\_\_\_\_ ELECTRIC SWITCH                      \_\_\_\_\_ LIGHTING FIXTURE                      \_\_\_\_\_ ELECTRIC SERVICE PANEL  
 \_\_\_\_\_ MOTOR UP TO 10 HP                      \_\_\_\_\_ MOTOR >10 UP TO 50 HP                      \_\_\_\_\_ MOTOR > 50 HP  
 \_\_\_\_\_ 2 POLE CIRCUIT                      \_\_\_\_\_ 3 POLE CIRCUIT                      \_\_\_\_\_ TEMP SERVICE CONNECTION

**Certification:** Under penalty of perjury, I (the undersigned) certify that I am the property owner or their authorized agent and that the above information is complete and accurate to the best of my knowledge. I understand that any changes in contractor information must be reported immediately to the City of Lake Jackson as a condition of the permit. I understand that failure to report changes may nullify and/or expire the permit without notice or further cause. I hereby certify that the above information is correct and that the construction of, along with the occupancy and use of the above-described property will be in accordance with the laws, rules and regulations of the City of Lake Jackson.

**Owner or Authorized Agent:** \_\_\_\_\_ **Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_  
 Printed Name

FOR STAFF USE ONLY	
Permit # _____	Project Address _____