



701 N Tool Dr.  
Tool, TX 75143

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www.tooltexas.org  
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## Swimming Pool Permit

Permit Number: \_\_\_\_\_

\*If permit application is approved\*

Project Address: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Project Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Project Type: Pool & Spa Pool Only Spa or Hot Tub Only Fountain/Water Feature Only

Above Ground Pool Only (does not include any other item) \_\_\_\_\_

Contract or Sales Price: \$ \_\_\_\_\_ **\*copy of sales contract must be attached\***

City Sewer Private Septic (Aerobic or Conventional) - Locate septic system tanks, leach fields, lateral lines and aerobic spray heads on site plan with any easements or flood plains.

I am the owner, the contractor or the duly authorized agent of the above property. I agree to comply with all codes and ordinances of the City of Tool. This permit is issued on the basis of information furnished in this application and on any submitted plans or documents and is subject to the provisions and requirements of the 2015 International Residential Code and the City of Tool Code of Ordinances. If any information is found to be untrue or incomplete this permit may be revoked, and all construction stopped until a new permit has been approved and issued. Permission is hereby granted to enter the premises to make inspections. I hereby accept all conditions herein and certify that all statements herein recorded by me are true.

\_\_\_\_\_  
Contractor/Agent Signature Date

\_\_\_\_\_  
Contractor/Agent Print Name

Initial (required): \_\_\_\_\_ I acknowledge that a code compliant pool barrier is required prior to final inspection

\_\_\_\_\_  
Building Official Signature Date

Permit Fee: \$ \_\_\_\_\_

Payment Type: Cash / Check # \_\_\_\_\_ / CC (fees apply if using CC)

\*\*\* Below Office Use Only \*\*\*

Setbacks: Front \_\_\_\_\_ L Side \_\_\_\_\_ R Side \_\_\_\_\_ Rear \_\_\_\_\_ Height \_\_\_\_\_ Zoning \_\_\_\_\_