

Residential Swimming Pool/Hot Tub/Spa Permit Packet

Commercial or Non-Residential Structure

Douglas County Zoning and Codes

3755 E 25th St, Lawrence, KS 66046



For use in Douglas County, Kansas

Overview

All design and construction must be in accordance with the 2018 International Residential Codes (IRC) & 2018 International Swimming Pool and Spa Code (ISPSA).

Required documents needing to be submitted with application packet are listed below.

Primary Documents

Approval from Lawrence Douglas County Health Department

E-mail address ehinfo@ldchealth.org.

Site plan- An aerial view is accepted and will need the following on site plan.

North Direction Arrow

Property owner's name & address of property.

Location of proposed pool on the lot showing all dimensions:

Front setback from the center of the road.

Side & rear setbacks from property lines.

Identify floodplain if applicable.

Fence/Barrier location

2 Sets of Pool Construction drawings shall include the following:

Pool cross section and elevations. Include slope of pool floor and depths.

Illustrated Pool Equipment Location

Main Drain Locations

Provide equipment specification information.

Provide pool volume in gallons, turn-over time, and flow rate.

Detailed information depicting the pool barrier method:

Provide manufacturer specifications and installation recommendations if using an ASTM F 1346 power safety cover. Or provide barrier information.

Other Documents

Completed building permit application.

Owners Authorization Form (If you are the owner's authorized agent obtaining the permit)

Pool Construction Affidavit

Helpful Hints- Property Viewer can help you create your site plan, from the aerial.

Located under dgcoks.gov/propertyviewer, another helpful document is GIS Quick Guide which will help you navigate the property viewer.

Pool Barrier Affidavit

As the owner or contractor of the property listed in this application, in Douglas County, Kansas, I am aware of and have received a copy of the requirements for the enclosure of a pool.

I take full responsibility, as the property owner, for ensuring that the building permit for the pool fence enclosure is obtained and that the pool or spa shall be appropriately protected by a properly constructed fence or barrier during and after construction, in accordance with Chapter 13 of the Douglas County construction code. Resolution 32-2-2.

An ASTM F 1346 Power Safety Cover can replace a barrier fence around the pool.

In addition, the structure will not be filled with water for use or occupancy as a swimming pool or spa until Douglas County Zoning & Codes Department has granted all final inspection approvals.

I have reviewed and understand that I am fully responsible for coordinating all the inspections listed on permit.

Owner or Contractor Signature

Print or Type Full Name

Signature Date

Notary Public

County of

SS

State of

Notary's Signature

Signed and sworn to (or affirmed) before me by the affiant listed below on the date provided.

Affiant Name

Signature Date

Notary Signature

Print Notary Name

Appointment Expiry Date

Owner Information

Primary Owner Full Name

Street Address

City State Zip

Phone Number Email Address

Property Information

Street Address

City State Zip

Section Township

Range Acreage

Subdivision Lot Block

Type of Permit

Residential Commercial

Type of Building Application (check all that apply)

In Ground Pool Above Ground Pool Hot Tub Spa

Deck/Porch Others

If others, briefly describe

Contractor Information

General Contractor

Full Name

Street Address

City State Zip

Phone Number Email Address

Electrical Contractor

Full Name

Street Address

City State Zip

Phone Number Email Address

Plumbing Contractor

Full Name

Street Address

City

State

Zip

Phone Number

Email Address

Electrical, Plumbing and Mechanical Contractor shall be licensed pursuant to KSA 12-1508 et. Seq.

Size and Valuation

Total Project Size

Building Valuation*

** Total cost of project to include materials and labor*

Utilities

Gas Company

Electric Company

Floodplain

Floodplain area (if applicable)

Flood elevation (if applicable)

Finish Floor Elevation

Hour Rating (if applicable)

Pool Construction Affidavit

As the owner or contractor of the property located at _____
in the Douglas County, Kansas, I agree to meet or exceed the design criteria of the attached
pool, spa, and/or hot tub detail and will comply with all the requirements of the Douglas
County Zoning & Building Codes in effect at the time of issuance of the permit.

In addition, I am aware that the dimension of the pool, spa and/or hot tub
cannot increase without prior approval. I have reviewed and understand that I am fully
responsible for coordinating all the inspections listed on permit.

Owner or Contractor Signature

Print or Type Full Name

Signature Date

Notary Public

County of

SS

State of

Notary's Signature

Signed and sworn to (or affirmed) before me by the affiant listed below on the date provided.

Affiant Name

Signature Date

Notary Signature

Print Notary Name

Appointment Expiry Date

Owner Authorization

I/We _____, hereby referred to as the “Undersigned”, being of
lawful age, do hereby on this _____, make the following
date, statements to wit:

1. I/We the Undersigned, on the date first above written, am/are the lawful owner(s) in fee simple absolute of the following described real property: See “Exhibit A, Legal Description” attached hereto and incorporated herein by reference.
2. I/We the Undersigned, have previously authorized and hereby authorize (Herein referred to as “Applicant”), to act on my/our behalf for the purpose of making application with Zoning and Codes department regarding _____ (common address), the subject property, or portion thereof. Such authorization includes, but is not limited to, all acts or things whatsoever necessarily required of Applicant in the application and building process, including verification that contractors hold a current license to work within Douglas County, Kansas.
3. It is understood that in the event the Undersigned is a corporation or partnership, then the individual whose signature appears below for and on behalf of the corporation or partnership has in fact the authority to bind the corporation or partnership to the terms and statements contained within this instrument.

In witness thereof, I, the undersigned, have set my hand and seal below.

Owner Signature

Print or Type Full Name

Signature Date

Owner Signature

Print or Type Full Name

Signature Date

Notary Public

County of _____

State of _____

SS

Signed and sworn to (or affirmed) before me by the affiant listed below on the date provided.

Affiant Name

Signature Date

Notary Signature

Print Notary Name

Appointment Expiry Date