



POOL PERMIT APPLICATION

Please return application and plans as needed with the property address in the subject line to permits@daytonmn.gov

APPLICANT IS:		OWNER	CONTRACTOR
SITE ADDRESS:		SUITE #:	
CITY:	STATE:	ZIP:	
JOB DESCRIPTION:		VALUATION:	

OWNER	
OWNER NAME:	
OWNER ADDRESS:	
OWNER CITY, STATE, ZIP:	
OWNER EMAIL:	
OWNER PHONE:	

CONTRACTOR	
CONTRACTOR NAME:	LICENSE:
CONTRACTOR ADDRESS:	
CONTRACTOR CITY, STATE, ZIP:	
CONTRACTOR EMAIL:	
CONTRACTOR PHONE:	

MECHANICAL CONTRACTOR	
CONTRACTOR NAME:	LICENSE:
CONTRACTOR ADDRESS:	
CONTRACTOR CITY, STATE, ZIP:	
CONTRACTOR EMAIL:	
CONTRACTOR PHONE:	

TYPE OF POOL	
IN-GROUND POOL Size of Pool	ABOVE-GROUND POOL Size of Pool Wall Height
NON-CLIMBABLE FENCE? YES NO If NO , Separate Fence Permit Required	WILL THE POOL BE HEATED? YES NO
AUTOMATIC POOL COVER (F1346-91 ASTM) IN LUE OF FENCE? YES NO	

POOL ENCLOSURE- IF ABOVE GROUND POOL DECK WITH GATED ENTRANCE (Separate Permit Required) FENCE (Around Pool Only- Separate Permit Required) FENCE (Around Ladder Only) GATED LADDER
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THE UNDERSIGNED HEREBY AGREES THAT, IN CASE SUCH PERMIT IS GRANTED, THAT
ALL WORK WHICH SHALL BE DONE AND ALL MATERIALS WHICH SHALL BE USED SHALL
COMPLY WITH THE PLANS AND SPECIFICATIONS HERewith SUBMITTED AND WITH ALL
THE ORDINANCES OF SAID CITY OF DAYTON APPLICABLE HERETO.

NAME OF APPLICANT (please print)

APPLICANT SIGNATURE

DATE

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OFFICE USE ONLY

PERMIT TYPE:

BUILDING (All inground; > 5,000 gallons; or 24" depth)

ZONING (<5,000 gallons above ground)

ADDITIONAL FEES:

REQUIRED INSPECTIONS:

FOOTING

MECHANICAL ROUGH IN

MECHANICAL FINAL

FINAL

WORK TYPE:

NEW

REPLACE

ALTER/REMODEL

MOVE

REQUIRED APPROVAL

ZONING ADMINISTRATOR:

DATE:

BUILDING INSPECTOR:

DATE:

COMMENTS: