



# City of Willow Park

516 Ranch House Road

Willow Park, Texas 76087

Phone: (817) 441-7108 \* Fax: (817) 441-6900

[www.willowpark.org](http://www.willowpark.org)

## Residential Swimming Pool/Spa Permits

**When is a permit needed?** A swimming pool/spa erected below ground or above ground with a depth of 18 inches or greater may be constructed and operated provided a swimming pool building permit has been issued. No building permit shall be issued unless the proposed sanitary facilities and water supply comply with applicable local and State health department regulations. A plan review is required and a permit fee for building, electrical and plumbing are due upon submission of application.

### **What are the requirements for a residential Swimming Pool?**

1. The pool is not located in any required front or side yard abutting a street.
2. The swimming pool/spa is no closer than ten (10) feet from any property line nor 10 feet from building structures.
3. Every outdoor swimming pool or family pool shall be completely surrounded by a fence or wall not less than four (4) feet in height, which shall be constructed as not to have openings, holes, or gaps larger than four (4) inches. A dwelling house or accessory building may be used as of such enclosure.
4. All gates or doors opening through such enclosure shall be equipped with a self-closing and self-latching device for keeping the gate or door securely closed at all times when not in actual use, except that the door of any dwelling which forms a part of the enclosure need not be so equipped.
6. This requirement shall be applicable to all new swimming pools or family pools hereafter constructed, other than indoor pools, and shall apply to all existing pools which have a minimum depth of 18 Inches of water. No person in possession of land within the city, either as owner, purchaser, lessee, tenant or a licensee, upon which is situated a swimming pool or family pool having a minimum depth of 18 inches shall fail to provide and maintain such fence or wall as herein provided.

### **Submittal Requirements**

**Permit Application with an original signature must be complete and submitted with the following information:**

#### **(2) Site Plan to include:**

- \_\_\_\_\_ Legal Description (lot, block, subdivision) and address of property
- \_\_\_\_\_ Property lines, lot dimensions and setbacks
- \_\_\_\_\_ Location of proposed pool and all existing buildings on property, showing distance to property lines and all buildings. Location of water wells, septic systems and lateral lines.
- \_\_\_\_\_ All easements and overhead utilities. Stamped approval of utility company
- \_\_\_\_\_ Proposed pool enclosure
- \_\_\_\_\_ Equipment dimensions in reference to property lines

#### **(2) Pool Design and Specifications**

- \_\_\_\_\_ Must include all gas and electric devices, backflow prevention device, diving areas and size of diving board, ladders, depths of water, decking, and equipment drawings/diagrams.
- \_\_\_\_\_ *Contractor Registration required for Pool Contractor, Electrician, and Plumber.*

**Please contact Homeowner's Association for additional requirements from Deed Restrictions and Covenants.**



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## Residential Permit Application

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<b>Building Permit Number:</b> _____		<b>Valuation:</b> _____	
<b>Project Address:</b> _____		<b>Zoning District:</b> _____	
<b>Lot:</b> _____	<b>Block:</b> _____	<b>Subdivision:</b> _____	
<b>Project Description:</b>	<b>NEW SFR</b> <input type="checkbox"/>	<b>SFR REMODEL/ADDITION</b> <input type="checkbox"/>	<b>ACCESSORY BUILDING</b> <input type="checkbox"/>
	<b>PLUMBING</b> <input type="checkbox"/>	<b>MECHANICAL</b> <input type="checkbox"/>	<b>ELECTRICAL</b> <input type="checkbox"/>
<b>DRIVEWAY</b> <input type="checkbox"/>	<b>FENCE</b> <input type="checkbox"/>	<b>LAWN IRRIGATION</b> <input type="checkbox"/>	<b>SWIMMING POOL</b> <input type="checkbox"/>
			<b>DEMO</b> <input type="checkbox"/>
			<b>FENCE</b> <input type="checkbox"/>
<b>Description of Work:</b> _____			
<b>Area Square Feet:</b>	<b>Covered</b>	<b>Total:</b>	<b>Number of stories:</b>
<b>Living:</b> _____	<b>Porch:</b> _____	_____	_____
<b>Garage:</b> _____			
<b>IS THIS PROPERTY IN A FLOODPLAIN:</b>		<i>If yes, provide Flood Plain Certificate</i>	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>Owner Information:</b> _____			
<b>Name:</b> _____		<b>Contact Person:</b> _____	
<b>Address:</b> _____			
<b>Phone Number:</b> _____		<b>Fax Number:</b> _____	
		<b>Email:</b> _____	

<b>General Contractor</b>	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
<b>Mechanical Contractor</b>	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
<b>Electrical Contractor</b>	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
<b>Plumber/Irrigator</b>	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>
<b>TPO Energy Provider</b>	Contact Person	Phone Number	Contractor License Number <input type="checkbox"/>

**A permit becomes null and void if work or construction authorized is not commenced within 180 days, or if construction or work is suspended or abandoned for a period of 180 days at any time after work is commenced. All permits require final inspection.**

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OFFICE USE ONLY:**

<b>Approved by:</b>		<b>Date approved:</b>	
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**Building Permit Fee:** \$ \_\_\_\_\_

**Plan Review Fee:** \$ \_\_\_\_\_

**Electrical Permit Fee:** \$ \_\_\_\_\_

**Plumbing Permit Fee:** \$ \_\_\_\_\_

**Mechanical Permit Fee:** \$ \_\_\_\_\_

**Total Permit Fees:** \$ \_\_\_\_\_

**Received By:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**BV Project #:** \_\_\_\_\_



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## Bureau Veritas Contact Information

### Permit Submittal

The permit documents and fees will be submitted to the city. Submittal documents should be complete to expedite plan review and permit issuance. Please contact the city for a complete list of permit submittal requirements.

### Plan Review

Bureau Veritas will be conducting residential and commercial plan reviews. The applicant will be contacted by Bureau Veritas if revisions are needed. You may contact Bureau Veritas' Plano Plan Review Department for the status of your permit at (817) 335-8111/toll free (877) 837-8775.

### Inspection Requests

Please contact Bureau Veritas to request inspection(s). Any of our permit technicians can assist you. Inspections requested by 5:00 pm Monday – Friday will be performed the next business day. Inspection requests can also be faxed to the Bureau Veritas office.

Inspection Request line: (817) 335-8111 Toll Free number: (877) 837-8775

Inspection FAX line: (817) 335-8110 Toll Free FAX line: (877) 837-8859

Inspection requests can also be emailed to: [nspectionstx@us.bureauveritas.com](mailto:nspectionstx@us.bureauveritas.com)

### Field Inspections

Inspectors assigned to your area can be contacted via cell phone. Please call the Bureau Veritas office at (817) 335-8111/(972) 980-8401/toll free (877) 837-8775 for your inspector's name and number.

**We look forward to working with you to ensure that the community is provided with a safe and durable built environment.**



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# Contractor Registration Form

### TYPE OF CONTRACTOR LICENSE

\_\_\_\_\_ ELECTRICAL CONTRACTOR

\_\_\_\_\_ MASTER ELECTRICIAN

\_\_\_\_\_ JOURNEYMAN ELECTRICIAN

\_\_\_\_\_ MASTER SIGN ELECTRICIAN

\_\_\_\_\_ MASTER PLUMBER

\_\_\_\_\_ JOURNEYMAN PLUMBER

\_\_\_\_\_ MECHANICAL (HVAC)

\_\_\_\_\_ IRRIGATOR (LANDSCAPE)

\_\_\_\_\_ BACKFLOW (*special form required*)

\_\_\_\_\_ OTHER

\_\_\_\_\_ THIRD PARTY ENERGY PROVIDER

### CONTRACTOR INFORMATION

COMPANY NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

LICENSEE NAME: \_\_\_\_\_

LICENSEE NUMBER: \_\_\_\_\_

PHONE: \_\_\_\_\_

ADDRESS (MAILING): \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

### **PLEASE PROVIDE COPY OF DRIVER'S LICENSE AND STATE LICENSE**

**City of Willow Park must be listed as Certificate Holder on Liability Insurance Document**