

RESIDENTIAL POOL / HOT TUB PERMIT APPLICATION

2978 Birds Hill Road, East St. Paul, MB, R2E 1J5 • Phone: 204-669-8880 • Fax: 204-669-8882 • www.redriverplanning.com

INGROUND		ABOVE GROUND		Н	от тив		DECK 🔲	
		CC	NTACT	INFORMATION				
OWNER:				APPLICANT:				
MAILING ADDRESS:				MAILING ADDRESS:	i:			
CITY / PROVINCE:				CITY / PROVINCE:				
POSTAL CODE:				POSTAL CODE:	· 			
PHONE NO.:				PHONE NO.:				
EMAIL:				EMAIL:	_			
PROPERTY INFORMATION								
MUNICIPALITY:				_				
LEGAL DESCRIPTION	ON:							
CIVIC ADDRESS:								
DESCRIPTION OF V	WORK(S):							
DESCRIPTION OF HOW THE POOL/HOT TUB IS TO BE ENCLOSED TO COMPLY WITH BYLAW REGULATIONS: (height of fence, non-climbable barrier, railing attached to top of pool, etc)								
		PROPO	OSED PO	OOL INFORMATIO	ON			
Size of Pool / Hot T	Tub:			Esti	imated Va	alue of Pool	/ Hot Tub: \$	
				IFORMATION (if ap	ipplicable)			
	ied / Deta	ched		/ Uncovered RCLE ONE			Enclosed / Open CIRCLE ONE	
Height (from grade to	o top of deckin	ng):			Est	imated Valu	e of Deck: _ \$	
		RE	QUIRED	INFORMATION				
		Site Pla	_		Status of		und Pools and Decks Only	
Detailed Building Plans of the Pool and Deck (engineer sealed plans are required for inground pools / refer to deck booklet for required building plans for decks) Maximum Hard Copy Size of 11" x 17"				_	Plan Reviev	v Fee payable	hin 30 days of application) e by debit, cheque or cash ease refer to fee schedule)	<u> </u>
				REQUIREMENTS				
,		(Following application RRPD to adv		_				
г	YOOT OI OWI	mership – Above Ground Pools Onl	_	يا الالمالية م	Itoda IIII.a	iStructure and	d Transportation Approval Letter of Authorization	
		Manitoba Conservation Approve		_ _]
		Developers Approv					Geotechnical Report	
DECLARATION The undersigned hereby applies for a permit in accordance with this application, all municipal by-laws and provincial regulations applicable thereto.								
1110 00	lea ne. e., .,	pplies for a permit manager	TOTAL SET	plication, an	II Dy IG	ma promissi	regulations applicable and	
Applicant Name:								
Applicant Signatur	re:			Date	e:			
OFFICE USE ONLY:								
PLAN REVIEW RECEIPT NO.:						ROLL NO.:		
DATE OF SUBMISSION:					=	ZONE:		_
RECEIVED BY:					-			_
Macailla a								_