



**City of West Point**

Mayor Richard A. Ciresi  
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**SWIMMING POOL PERMIT APPLICATION**  
**PROJECT INFORMATION**

Site Address \_\_\_\_\_

Property Owner Name \_\_\_\_\_

**OWNER INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

**CONTRACTOR INFORMATION**

Project Contractor \_\_\_\_\_ Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

**BUILDING INFORMATION**

Pool Type (Circle) Above Ground Inground

Approximate Gallons \_\_\_\_\_

Is Pool heated? Yes \_\_\_ No \_\_\_ If heated, please list gas contractor below.

Electrical Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Master Electrician: \_\_\_\_\_ CE# \_\_\_\_\_ ME# \_\_\_\_\_

Gas Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Plumbing Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please Attach a site plan including:**

**Dimensions of property lines, location and dimensions of pool with setback from pool to each property line. Show distance between pool and house and other structures. Location of fence, deck, or any other accessory structures. Show any easements or overhead/underground power lines.**

I certify no construction or portion of construction will be built over or under any electrical, water, sewer, storm water or any other utility easement or rights-of-way.

\_\_\_\_\_ (Initials).

I hereby certify that I am the owner of the record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued I certify that the code official's or the code official's representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit. I further testify that the above information is true and acute.

Signature \_\_\_\_\_ Date \_\_\_\_\_