



CITY OF HEATH
 200 Laurence Dr., Heath TX 75032
 972-961-4883 Phone 469-273-4015 Fax

SWIMMING POOL PERMIT

Permit # _____

Project Address _____

Subdivision _____ Lot _____ Block _____

Owner _____ Phone _____ Email _____

Owner Address _____

Street _____ City _____ State _____ Zip _____

Contractor _____ Phone _____ Email _____

Project Contact _____ Phone _____ Email _____

SUB CONTRACTORS

Electrical

Contractor _____ Phone _____ Email _____

Plumbing

Contractor _____ Phone _____ Email _____

CHECK PROJECT TYPE: Pool & Spa Pool Only Spa or Hot Tub only
 Fountain/Water Feature only Above Ground Pool Only (does not include any other item)

CONTRACT OR SALES PRICE _____ *** COPY OF SALES CONTRACT MUST BE ATTACHED***

SEPARATE PERMIT(S) REQUIRED FOR: Cabana/Arbors, Grill/Outdoor kitchens, Fire Pits, Outdoor Shower, Fence

City Sewer Private Septic (Aerobic or Conventional). Locate septic system tanks, leach fields, lateral lines and aerobic spray heads on site plan with any easements or flood plains.

I am the owner, the contractor or the duly authorized agent of the above property. I agree to comply with all codes and Ordinances of The City of Heath. This permit is issued on the basis of information furnished in this application and on any submitted plans or documents, and is subject to the provisions and requirements of the 2021 International Residential Code and The City of Heath Code of Ordinances. If any information is found to be untrue or incomplete this permit may be revoked and all construction stopped until a new permit has been approved and issued. Permission is hereby granted to enter the premises to make inspections. I hereby accept all conditions herein and certify that all statements herein recorded by me are true.

Approved:

Building Dept _____

Signed _____

Contractor or Agent

Print Name _____

Date _____

Permit Fee _____

Initial (required): _____ I acknowledge that a code compliant pool barrier is required prior to Pool Final Inspection.



CITY OF HEATH

Swimming Pool Barrier and Alarm Requirements

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE POOL/SPA PERMIT SUBMITTAL PACKAGE

Barrier Requirements -- Abridgement from the 2021 International Residential Code AG105

This form is for informational purposes only. This is not meant to be an exhaustive list, nor is it to take the place of the referenced code. There are additional requirements/information that are not stated on this page.

An outdoor swimming pool, spa, (All hereafter referred to as “pool”) shall be provided with a fence, wall, building wall or combination thereof which surrounds the pool and obstructs access to the pool. The barrier shall comply with the following:

1. The top shall be at least 48” above grade,
2. The maximum clearance between grade and bottom of barrier is 2”
3. Maximum size of openings in the barrier vertical is 4”
4. Maximum mesh on chain link fences is 2 ¼”
5. Maximum diagonal (ex: Lattice) is 1 ¾”

Gates must have:

1. Have a self-closing, self-latching device
2. Must open outward away from the pool

Gate latch must have:

1. The release mechanism must be located 54” above the bottom of the gate, unless:
2. The release mechanism is located on the pool side of the gate at least 3 inches below the top of the gate, and
3. The gate and barrier shall have no opening larger than a ½” within 18” of the release mechanism

Where a wall of a dwelling serves as part of the barrier, one of the following conditions must be met:

1. The pool shall be equipped with a powered safety cover in compliance with ASTM F1346, or
2. Doors with direct access to the pool through that wall shall be equipped with an alarm which produces an audible warning when the door and/or its screen, if present, are opened. The alarm shall be listed and labeled in accordance with UL 2017. The deactivation switch(es) shall be located at least 54” above the threshold of the door: or
3. Other means of protection which may be approved by the Building Official prior to installation

Job Address: _____

Permit No: _____

Homeowner (Print): _____

Homeowner (Sign): _____

Date: _____

Pool Company Rep. (Print): _____

Pool Company Rep. (Sign): _____

Date: _____



Subcontractor Validation

Project Address: _____

Type of Project: _____ Permit #: _____

Type of Contractor: (Check One)

- Plumbing
- Mechanical
- Electrical

Company Name: _____

Master License Name: _____

Master License #: _____ Expiration Date: _____

State License #: _____ Expiration Date: _____

Signature of license holder: _____

Print Name: _____ Date: _____