



Planning and  
Community Development  
Cynthiana - Harrison County - Berry  
Planning Commission

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Pool Permit Application

Permit Number  City  County

Construction Location	Zoning
Subdivision	
Applicant	Contact Name
Address	Contact Numbers
Applicant is? <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Both	Pool Use: <input type="checkbox"/> Private <input type="checkbox"/> Public
Name of individual or company performing electric work for the pool:	
<p>NOTES:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Completion of the above information.</li> <li><input type="checkbox"/> Owner Acknowledgement of Swimming Pool Enclosure Requirements.</li> <li><input type="checkbox"/> Site / Plot plan showing location of pool with distances to property lines.</li> <li><input type="checkbox"/> Proof of Kentucky Workers Compensation insurance, (if pool is installed by someone other than owner)</li> <li><input type="checkbox"/> Cross section of pool showing water depths, floor and wall slopes, dimension and height of diving board above water line (if applicable).</li> <li><input type="checkbox"/> Detailed plans of the pool circulation system demonstrating compliance with 2013 KRC Section AG106: Entrapment Protection for Swimming and Spa Suction Outlets.</li> <li><input type="checkbox"/> Complete details of pool enclosure. Drawing must include type of fencing, height and details of openings. The undersigned hereby certifies that all information is true and accurate to the best of their knowledge.</li> <li><input type="checkbox"/> The 2013 Kentucky Residential Code (KRC) shall control the design and construction of in-ground swimming pools install on the lot of a one- or two-family dwelling. Public swimming pools shall be designed and constructed according to the 2013 Kentucky Building Code (KBC).</li> <li><input type="checkbox"/> Refer to Fee Schedule for permit fees.</li> </ul>	

The undersigned hereby certifies they are the owner or owner's agent of the property and that all information is true and accurate to the best of their knowledge.

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

OFFICE USE ONLY			
Total Permit Fee:	Remarks:		
Receipt #	Date Received:	Check #:	Received By:

**NOTE: APPLICATION MUST BE COMPLETED IN FULL AND SUBMITTED WITH ALL ADDITIONAL PAPERWORK AS REQUIRED ON CHECKLIST.**