

VILLAGE OF CALEDONIA

5043 CHESTER LANE ● CALEDONIA, WI 53402 PHONE (262) 835-6420

Permit No.
Parcel No.
Receipt No.

SWIMMING POOL PERMIT APPLICATION

Owner's Name			Owner's Email			
Owner's Mailing Address, City, State & Zip (if different from Project Address) Phone						
Contractor's Business Name				Contractor's Email		
Contractor's Business Mailing Address, City, State & Zip Phone						
					()	
Contractor's Certificate No. Exp. Date			Contractor's Qualifier No. Exp. Date			
PROJECT ADDRESS:	Fax ()					
ESTIMATED PROJECT COST \$						
SETBACKS: Distance from lot	Rear Lot Line	Left Lot Line		Right Lot Line	Distance from main structure:	
lines to the pool. (Standing with your back against the house,	Ft.		Ft.	Ft.	Ft.	
looking into the backyard.)	POOL DESIGN (Required)					
Circle one: Above ground Inground AN ELECTRICAL PERMIT MAY BE REQUIRED						
	•				ALL DE KEROKED	
Style: (circle one) Roun	d Oval	Recta	angie	Other:		
Height (pool wall from grade) If less than 48 inches, a fence permit is required. Inches						
Size:						
Any other information:						
The applicant agrees to comply with all applicable codes, statutes and ordinances and with the conditions of this permit; understands that issuance of the permit creates no legal liability, express or implied, on the Department or Municipality; and certifies that all of the above information is accurate.						
PRINT CONTACT PERSON Phone ()						
SIGNATURE OF APPLICANT Date						
OFFICE USE ONLY						
DESCRIPTION	FEES	P	LAN REVI	EWER'S INITIALS	DATE OF APPROVAL	
Zoning Fees						
Engineering Fees Building Fees (\$12.50/\$1,000 of						
estimated cost. Minimum fee of \$65)						
Total:						
Information checked to be submitted with application:						
□ Completed Application	□ Completed Application □ Plat of Survey with pool shown □ Pool Plans/Specifications					