

Application for a Swimming Pool

For use by Principal Authority	
Application number:	Permit number (if different):
Date received:	Roll number:

Application submitted to: **Town of Fort Erie**

A. Project information

Building number, street name		Unit number	Lot/con.
Municipality	Postal code	Plan number/other description	
Project value est. \$		Area of work (m ²)	

B. Purpose of application

Above Ground Pool <input type="checkbox"/>	In Ground Pool <input type="checkbox"/>	Hot Tub <input type="checkbox"/>
		Without a locked cover

C. Applicant

Applicant is: ☐ Owner or ☐ Authorized agent of owner

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	

D. Owner (if different from applicant)

Last name	First name	Corporation or partnership	
Street address		Unit number	Lot/con.
Municipality	Postal code	Province	E-mail
Telephone number ()	Fax ()	Cell number ()	

I. Declaration of applicant

I _____ declare that:

(print name)

- The information contained in this application, attached schedules, attached plans and specifications, and other attached documentation is true to the best of my knowledge.
- If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.

Date _____ Signature of applicant _____

