

CITY OF ELYRIA
COMMERCIAL SWIMMING POOL APPLICATION

Job Location	Date Stamp
Address. _____ Lot/Unit/Suite No. _____	
Project and or Business Name. _____	
Owner Information	
Name _____ Address _____	
City _____ State _____ Zip Code _____	
Phone (_____) _____ Mobile (_____) _____ Email _____	
Contractor Information	
Name _____ DBA _____	
Address _____	
City _____ State _____ Zip Code _____	
Phone (_____) _____ Mobile (_____) _____ Email _____	
Swimming Pool Fees	
1. Commercial Swimming Pool	\$ 250.00 _____
	Subtotal _____
	State Fee 3% of Subtotal _____ \$ _____
	Total Cost _____ (Cost of Proposed Work)
<i>A site (plot) plan must accompany this application.</i>	
<i>In addition, a separate Electrical Application must accompany this application.</i>	
<i>Design review and or Planning Commission approval may be required.</i>	
Signature of Owner: _____ . Print: _____ .	
Signature of Agent: _____ . Print: _____ .	
Date: _____ .	

Date Approved. _____ Inspectors Initials. _____ Zoning _____ Receipt No. _____ Permit No. _____
 Date Denied. _____ Comments. _____