

Permit # _____



Washoe County

Department of Building & Safety

1001 E. Ninth Street
P.O. Box 11130
Reno, NV 89520-0027
Phone (775) 328-2020

FAX (775) 328-6132 or FAX (775) 325-8016
www.washoecounty.us/bldgsafety



POOL

BUILDING PERMIT APPLICATION

Parcel Number: _____ **Address:** _____

Owner Information: Owner/Builder Permit (residential only)? ___ Yes ___ No
Name: _____ Phone No: _____
Address: _____

Contractor Information:
General Contractor: _____ Contact Name: _____
Address: _____
Phone : _____ Fax : _____
Nevada License No. : _____ County Business License No.: _____

Design Professional Information:
Architect's Name: _____ Phone No.: _____
Email: _____ Fax No.: _____
Engineer's Name: _____ Phone _____
Email: _____ Fax No.: _____

Person to contact regarding the permit:
Name: _____ Phone No.: _____
Email: _____ Fax No.: _____

Permit # _____

Project Information:

(Complete Applicable Items)

Electrical: Yes No
No. of electrical circuits: _____
Public Pool: Yes No
Private Pool: Yes No
Pool filling system: Yes No
Pool heater: Yes No
Backwash receptor Yes No

Septic System: Yes No
Architectural Committee Yes No

Repair or addition:

Replace filter: Yes No
Replace misc: Yes No Description: _____
Replace drain: Yes No
Other: Yes No Description: _____

Applicant (print) _____ **Date:** _____

Signature _____

FOR OFFICE USE ONLY