

APPLICATION FOR A

POOL ENCROACHMENT VARIANCE

Project Name:	
Project Address/Legal Description:	_
Applicant's Name:	
Mailing Address:	
Email Address:	
Phone Number:	
Owner's Name (if different from Applicant):	
Mailing Address:	
Email Address:	
Phone Number:	
Description of the hardship or reasons the Variance is being requested:	

The City Building Official (CBO) shall consider applications for pool construction within a setback so long as the pool does not encroach within five (5) feet of a neighboring property. The CBO shall not approve an pool pumps and other equipment into the setback. The portions of the pool encroaching within the setback must not be more than five inches in height measured from average natural grade. The CBO shall also consider the following factors:

- (I) Amount of impervious cover proposed;
- (II) Proximity to nearby developed properties; and
- (III) Anticipated impact of project or encroachment on neighbors.

Regarding the review criteria for a pool encroachment varies or no for the following questions:	iance, please	select eit	her
Does the proposed pool encroach within 5 feet of a neighborin	g property? Y	YES N	NO
Does your pool pump or other pool equipment encroach into the	he setback? Y	ZES N	NO
Is the pool more than five inches in height from average natural encroaches? YES NO	al grade, on an	ıy part wl	nere the pool
Additional comments applicant would like to add:			
Submittal Checklist:			
□ Signed and Completed Application□ Required Application Fee Paid \$500			
Exhibits ☐ Pool Specs and Dimensions ☐ Survey/Site Plan depicting pool location ☐ Architectural Elevation ☐ Other:			
Upon submittal of application, a Public Notice sign is required to within 48 hours. Signs can be picked up at the City Hall for a non-The sign is not required to be returned to the City.			ct property
All required items and information (including all applicable above received by the City in order for an application and request to be a submissions will not be reviewed or scheduled for any further act information has been received. By signing below, I acknowledge to above requirements for a complete submittal:	considered com tion until all de	plete. Inc e e ficient ite	omplete ems or
Signature of Applicant	Date	<u>,</u>	
Signature of Owner (or attached letter of consent)	Date		