



**Chatham County Department of Building  
Safety & Regulatory Services**

P.O. Box 8161, Savannah, GA 31412-8161  
912-201-4300 - Fax 912-201-4301



**Gregori S. Anderson, CBO  
Director**

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Assistant Director**

**POOL / SPA PERMIT APPLICATION**

*The following information must be submitted with the permit application:*

- A completed Fence application with two copies of fence detail.
- Two copies of a site plan. Show what is existing on the lot (building, easement, septic system, etc.), property lines, and where the pool will be located.
- Two copies of pool drawings/specifications including equipment.
- Subcontractor Signature Page
- Homeowner Affidavit
- Copy of Georgia State license and copy of local Georgia business license
- Construction Plans / Drawings – Two copies
- Environmental Health Department *(ALL lots that have/will have a septic tank)*
- Engineering Department *(If pool is located in a flood zone)*

P.I.N.: \_\_\_\_\_ *Obtained from Tax Assessors Office (912) 652-7271.*

Project Address: \_\_\_\_\_

**Pool Permit**

**Spa Permit**

**Owner:**

Name: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Person applying for permit:**

Name: \_\_\_\_\_ Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

**Contractor:**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax No. (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_





# Chatham County Building Safety & Regulatory Services

## COMPLETE APPLICATION CHECKLIST AFFIDAVIT

All required approvals must be received when submitting the permit application. If any forms or approvals are missing, all paperwork will be returned to applicant.

Address: \_\_\_\_\_ Permit # \_\_\_\_\_

### Required Forms & Documents

**Y N N/A**

- Signed Application
- Complete Application Checklist Affidavit (*this form*)
- Site Plan – Two copies (11-1/2 by 17)
- Two copies of equipment specifications
- Subcontractor Signature Page
- Homeowner Affidavit
- Copy of Georgia State license and copy of local Georgia business license
- Construction Plans / Drawings – Two copies

### All Required Additional Approvals

**Y N N/A**

- Environmental Health Department (*ALL lots that have/will have a septic tank*)
- Engineering Department (*New construction in a flood zone*) - See Subdivision Exceptions

***Supplemental information may be required during plan review to address deficiencies.***

Pursuant to the requirements established by Georgia Law Section §8-2-26, I am submitting all documents checked “Y” above for review and approval.

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

Office Use Only

Complete    Not Complete   Name: \_\_\_\_\_ Date \_\_\_\_\_

Environmental Health	Link to septic application: <a href="https://www.gachd.org/wp-content/uploads/2019/05/Septic-App-Fillable-1.pdf">https://www.gachd.org/wp-content/uploads/2019/05/Septic-App-Fillable-1.pdf</a> 1395 Eisenhower Drive, Savannah, GA 912-356-2160
Engineering Department	124 Bull Street, Savannah, GA Call 912-652-7800 for an appointment –take one set of construction plans



## CHATHAM COUNTY POOL/SPA SUBCONTRACTOR LIST

Job Location \_\_\_\_\_

Pool Contractor \_\_\_\_\_

Permit # \_\_\_\_\_

### **PLUMBING**

Date \_\_\_\_\_

I hereby certify that I will perform the plumbing work for the project described above and I further certify that I have a valid Georgia State license and Local Business License.

Local Business License # \_\_\_\_\_ Jurisdiction \_\_\_\_\_

State License # \_\_\_\_\_ Expires: \_\_\_\_\_

Company Name \_\_\_\_\_

E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Phone No. (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### **ELECTRICAL**

Date \_\_\_\_\_

I hereby certify that I will perform the electrical work for the project described above and I further certify that I have a valid Georgia State license and Local Business License.

Local Business License # \_\_\_\_\_ Jurisdiction \_\_\_\_\_

State License # \_\_\_\_\_ Expires: \_\_\_\_\_

Company Name \_\_\_\_\_

E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Phone No. (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

# SAMPLE PLOT PLAN AND DETAILS

