APPLICATION FOR POOL PERMIT \$25 above-ground \$50 in-ground

No sewer credit for filling pool and pools CANNOT be filled from fire hydrant

VILLAGE OF OKAWVILLE 304 N Front Street – PO Box 483 Okawville, IL 62271 Phone (618)243-5972

(Do not write in this space For office use only)	
Date: Zoning fee paid: \$	
() Permit issue No () Permit denied If denied, cause of denial: () Application appealed No () Variance or Special Permit No	
INSTRUCTIONS TO APPLICANTS : All information required by the application must be compand submitted herewith. Applicants are encouraged to visit the Village Hall or call 618-243-5972 for assistance needed in completing this form.	
1. Name of property owner(s): Phone:	
Complete mailing address:	
Property Owners Signature required if Rental Property:	
2. Applicant's name: Phone:	
Complete mailing address:	
3. Property interest of applicant (Owner, Renter, etc.):	
4. Property address of proposed Pool:	
5In-Ground PoolAbove-Ground Pool	
6. Zoning District:	
7. A copy of current homeowner's insurance.	
 7. A sketch plan (drawn to approximate scale) shall be shown on the reverse side or may be attached showing the following: a) Dimensions of the zoning lot; b) Dimensions and use of all buildings (show overall dimensions of house including garage if applicable); c) Distance of each building from all zoning lot lines; d) Distance between accessory buildings and principal buildings; e) Any additional information as may be reasonably required by the Zoning Department. 	
Signature Da	te