



Township of Chapple

Pool Fence Permit – Application Guidelines (By-law 1745)

NOTE:

Before excavation or construction of a pool begins, a temporary safety fence is to be constructed.

Description		Required	Submission Status	Comments
Application Required	Pool Fence Permit Application			
Documentation/Information Required	<p>Site Plan (size and shape of lot) including the following:</p> <ul style="list-style-type: none"> Proposed size and shape of pool and fence Fencing details and gate locations as per By-Law 1580-13 Location and extent of existing septic system, site features with buildings. Pools shall not be located within 5 metres of septic distribution pipe or within the septic loading area or sand mantel (if applicable). Location of geo thermal system (if applicable). Easements Site alteration/topsoil preservations may be required 2 copies of all drawings/documents Letter from owner authorizing agent to act on their behalf (if applicable) 			
Other Information	<ul style="list-style-type: none"> All decks require a separate permit Additional information may be required following a full review of your permit application 			



Township of Chapple

Pool Fence Permit Application

A. Project Information			
Street Number, Street Name		Unit Number	Lot/Con.
Municipality	Postal Code	Plan Number/Other Description	
B. Applicant Information			
Applicant is: <input type="checkbox"/> Owner or <input type="checkbox"/> Authorized Agent of Owner			
Last Name	First Name	Firm (if applicable)	
Street Address		Unit Number	Lot/Con.
Municipality	Postal Code	Province	E-mail
Telephone Number ()	Fax ()	Cell Number ()	
C. Owner (if different from applicant)			
Last Name	First Name	Firm (if applicable)	
Street Address		Unit Number	Lot/Con.
Municipality	Postal Code	Province	E-mail
Telephone Number ()	Fax ()	Cell Number ()	
D. Installer Information (if other than owner)			
Individual who reviews and takes responsibility for installation activities			
Last Name	First Name	Firm (if applicable)	
Street Address		Unit Number	Lot/Con.
Municipality	Postal Code	Province	E-mail
Telephone Number ()	Fax ()	Cell Number ()	
E. Declaration of applicant			
I _____ certify that:			
(print name)			
<ol style="list-style-type: none"> The information contained in this application, attached schedule, attached plans and specifications, and other attached documentation is true to the best of my knowledge. I have authority to bind the corporation or partnership (if applicable). 			
Date		Signature of applicant	
<small>Personal information contained on this form is collected pursuant to The Municipal Freedom of Information and Protections and Privacy Act, and will be used for the purpose of collecting information for the issuance of pool fence permits within the Township of Chapple. Questions about this collection should be directed to the FOI Coordinator, The Corporation of the Township of Chapple, 54 Barwick Rd, PO Box 4, Barwick, ON P0W 1A0</small>			
Township Use Only			
Application Number:		Permit Number (if different):	
Date Received:		Roll Number:	

