

**Thorold**

Corporation of the City of Thorold  
 Planning & Building Services, By-Law Division  
 3540 Schmon Parkway, Thorold, Ontario L2V 4A7  
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# Application for a Permit to Erect a Private Outdoor Swimming Pool

### For Use by Municipality

APO Number	Tax Roll Number
Required Departmental Approvals Prior to Permit Issuance	
<input type="checkbox"/> Planning Division	received by: _____ date: ___ / ___ / ___
<input type="checkbox"/> Region of Niagara (septic)	received by: _____ date: ___ / ___ / ___
<input type="checkbox"/> Niagara Escarpment Commission	received by: _____ date: ___ / ___ / ___
<input type="checkbox"/> Ministry of Transportation	received by: _____ date: ___ / ___ / ___

Date Received

### A) Pool Project Information

Address of Project			
Building Number	Street Name	Corner Lot	Municipal Services
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Sewer <input type="checkbox"/> Water
Building Use			
<input type="checkbox"/> Above Ground Pool <input type="checkbox"/> In Ground Pool <input type="checkbox"/> Seasonal Pool			
Lot Dimensions		Pool Dimensions	
Lot Frontage	Lot Depth	Pool Length or diameter	Pool Width
_____ (m)	_____ (m)	_____ (m)	_____ (m)

### B) Applicant Information Applicant is: Owner or Authorized Agent

Last Name	First Name	Company or Corporation	
Building Number	Street Name	Unit Number	Lot/con.
Municipality	Province	Postal Code	
Telephone Number	Cell Phone Number	Email Address	

### C) Owner Information (if different from Applicant)

Last Name	First Name	Company or Corporation	
Building Number	Street Name	Unit Number	Lot/con.
Municipality	Province	Postal Code	
Telephone Number	Cell Phone Number	Email Address	

### D) Applicant Declaration

I, the Applicant declare that the information contained in this application and attached documentation is true to the best of my knowledge.

\_\_\_\_\_ (date)

\_\_\_\_\_ (signature)

