



**CITY OF  
GREENSBURG**

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**Swimming Pool (In-ground and Above Ground)**  
**and Spa Permit Application**

314 West Washington Street  
 Greensburg, IN 47240  
 Office: (812) 662-8495

*Print in Ink — Incomplete Applications Will Not Be Processed — Permit Valid for One Year*

Instructions: Submit one drawing of pool/spa and site plan showing location of proposed pool/spa with setbacks

**1. LOCATION OF CONSTRUCTION ACTIVITY**  
 Address: \_\_\_\_\_  
 Lot: \_\_\_\_\_ Subdivision: \_\_\_\_\_

**2. PROPERTY OWNER INFORMATION**  
 Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**3. INDICATE USE OF POOL/SPA**  
**Start Date:** \_\_\_\_\_ **Completion:** \_\_\_\_\_  
 Residential  Commercial  Multi-Family  
 Located in Building  Other \_\_\_\_\_

**4. CONTRACTOR INFORMATION**  
 Company: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Contact Phone # \_\_\_\_\_  
*I certify the information on this form is complete and accurate.*

**5. DETAILS OF PLANNED INSTALLATION**

A. Size of Pool or Spa  
 Length \_\_\_\_\_ Width \_\_\_\_\_  
 Diameter \_\_\_\_\_ Depth \_\_\_\_\_  
 Total Square Feet \_\_\_\_\_

B. Size of Lot in Square Feet \_\_\_\_\_

C. Area of Rear Yard in Square Feet \_\_\_\_\_

D. Distance from Lot Lines (*site Plan for Pool required*)  
 Right Side \_\_\_\_\_ Left Side \_\_\_\_\_  
 Rear \_\_\_\_\_

E. Access to Pool Restricted By:  
 \_\_\_\_\_ Automatic Pool Cover  
 \_\_\_\_\_ Existing 4 foot Minimum Fence or Wall  
 \_\_\_\_\_ Fence, Wall, or Auto Pool Cover installed by:  
 \_\_\_\_\_

F. Will electrical work be required as part of the installation?  
 yes  no HVAC work?  yes  no

**6. ADDITIONAL DETAILS**

A. General Contractor Name: \_\_\_\_\_

B. Phone No. of Contractor \_\_\_\_\_

C. **Total Cost of Job:** \_\_\_\_\_

\_\_\_\_\_  
*Signature of Property Owner or Contractor* **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Application Approved Date approved \_\_\_\_\_ Initials: \_\_\_\_\_  
 Application Denied Permit # \_\_\_\_\_ Payment: \_\_\_\_\_