

COUNTY OF KANE

DEVELOPMENT DEPARTMENT
Building and Community Services Division
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RESIDENTIAL SWIMMING POOL, SPAS AND HOT TUBS AFFIDAVIT

Owner: _____

Pool Address: _____

City / Zip: _____

Type of pool: (pool plans and information are not required)

- In-ground pool, Spas and Hot Tubs
- Above-ground pool, On-ground pools, Spas and Hot Tubs
- Above-ground pool, Spas and Hot Tubs with deck

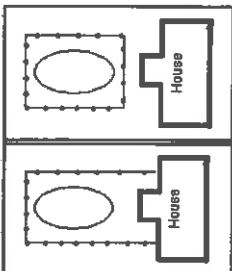
Type of Barrier: (must be drawn and labeled on site plan)

Top of the pool (and deck, if applicable) will be 48" above grade. Spas and Hot Tubs will have safety cover per AG105.5. All units will meet all of the applicable barrier requirements per Section AG105, Barrier Requirements.

The pool will be completely surrounded by a fence or barrier per Section AG105, Barrier Requirements.

The pool will be surrounded by a fence or barrier AND the wall of the dwelling will serve as part of the barrier. Both will comply with Section AG105, Barrier Requirements.

The pool will be completely indoors and all walls surrounding the pool shall comply with Section AG105.2, Item 9.



I hereby certify that the design and installation of the proposed pool will comply with *Appendix G, Swimming Pools, Spas and Hot Tubs* and *Chapter 42, Swimming Pools*, from the *2012 International Residential Code*. Swimming pools permits are valid for 6 month a final inspection must be completed within this time frame and before the pool is closed for the season.

Signature of owner or authorized representative

Date

Print name

Name of Pool Company / Installer