



DEPARTMENT OF BUILDING & SAFETY

APPLICATION FOR POOL, SPA, AND/OR WATER FEATURE

333 North Rancho Drive, Las Vegas NV 89106-3703

Phone: (702) 229-6251 Fax: (702) 382-1240

Project # _____ (CLV USE ONLY) Valuation \$ _____

Project/Tenant Name: _____

Project Address: _____ Zip Code: _____

For: Commercial and Public Single Family Residence Clark County Health District Approval
(required for public pools and/or septic)

Pool only Spa only Pool and Spa Water Feature

Gas line / Potable Water Septic

Total Gallons Pool and Spa: _____ Pool Surface Area: _____ Spa Surface Area: _____

Total Surface Area: _____

Applicant Information: Owner/Builder (Residential Only on primary residence)

Company Name: _____ Individual Name: _____

Phone: _____ Fax: _____ Email: _____

Contractor Information:

Company Name: _____ Contractor License #: _____ Business License#: _____

Plumbing Contractor Information:

Company Name: _____ Contractor License#: _____ Business License#: _____

Electrical Contractor Information:

Company Name: _____ Contractor License#: _____ Business License#: _____

Structural Engineer Information:

Company Name: _____ Business License#: _____

Attached plans prepared by: _____

Plumbing Plans prepared by: Contractor Design Professional Owner

Electrical Plans prepared by: Contractor Design Professional Owner

Structural Plans prepared by: Contractor Design Professional Owner

Permit Technician: _____ Date: _____

Fees Due\$: _____

**Permit Expires 180 Days After
Abandonment of Work**
Permits expire when no inspection has been approved for any 180-day
period after the permit has been issued.