

City of Huntington Beach

Department of Community Development **SWIMMING POOL PERMIT**

2000 Main Street, Huntington Beach, CA 92648 Office: (714) 536-5241 Fax: (714) 374-1647

Permit #	Job	Job Address (Street #, Street Name, Unit #, Zip Code):			
Property Owner's Name:	A ddra	as (Ctract # Ctract Nor	no Unit # City State 7in)	Phone Number:	
Property Owner's Name:	Addre	Address (Street #, Street Name, Unit #, City, State, Zip)		Phone Number:	
	Email	Address:			
Contractor's State License. #		Contractor Phone Nu	mber:	Construction Valuation \$: (Labor & Material Cost)	
				(Labor & Waterial Cost)	
Primary Contact Name:		Primary Contact Pho	ne Number:	Primary Contact Email Address:	
Timaly Contact Name.		Timary Comact The	io i tambon	Timary Comact Email / taareee.	
Architect/Engineer:		State License Number	er:	Phone Number:	
Address (Street #, Street Name, Unit #, City, Zip)					
Work Description:					
FEE SCHEDULE					
4					
 \$47.00 Minimum Inspection Fee Based on Project Valuation (See Table) \$39.00 Processing Fee 					
3. \$1.00 Imaging Fee					
4. Building Plan Review - 61% of Inspection Fee*					
5. Planning Plan Review - 20% of Inspection Fee*					
6. \$157.00 Pre-site Inspection					
* Plan Review Fee Due at Submittal					
Spa Area:	Pool Are	a	Electrical Fee \$151.00	Plumbing Fee \$134.00	
Diaming Apprecial Dec	Dots		Duilding Approval Div	Data	
Planning Approval By	Date		Building Approval By	Date	