

DATE OF APPLICATION: ____/____/____



A completed swimming pool application is required for underground and above ground pools over 5,000 gallons and/or more than two deep at any point and over 150 square feet or surface area.

1. Swimming pools are considered accessory structures and shall meet accessory structures' setback requirements.

<input type="checkbox"/> 45 ft front yard setback	<input type="checkbox"/> 6 ft side yard setback	<input type="checkbox"/> 10 ft rear yard setback	<input type="checkbox"/> 10 ft from principal structure
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2. The proposed project must not exceed the maximum impervious surface amount allowed for the property.
3. Rule B Permit: Soil Erosion Control – The City of Victoria encourages you to call the Minnehaha Creek Watershed District at 952-443-2363 to verify the need for this permit.
4. Two surveys with the following information must be submitted with the Swimming Pool Application
 - Location and dimensions of pool, pool equipment, patio/walkway, safety fence and any additional proposed structures drawn to scale.
 - Setbacks measured and noted, including the distance of pool equipment to the nearest property line.
 - Existing and proposed impervious surface area, including proposed pool decks, patios, walkways, etc.
 - If applicable, the location, size, and type of all trees over 8 inches in diameter, all trees, and noxious weeds to be removed, and proposed replacement trees on the property.
5. A safety fence meeting the following criteria is required.
 - At least 5 feet in height
 - Gates must be self-closing/self-latching at a height of 48 inches above grade and inaccessible to small children.
 - Gaps in the fence must be less than 4 inches.
 - Must be constructed of corrosion resistant material.
 - Fence posts must be decay or corrosion resistant and set in concrete bases or other suitable material.
 - The opening between the bottom of the fence and the ground or other surfaces must be less than 4 inches.
6. All pool equipment (pump, filter, or other apparatus) used to service a swimming pool must meet the required side yard setbacks of the principal structure, or ten feet minimum, whichever is greater.
7. The pool, all pool equipment, patio walkway and any other permanent structures may not be placed in any drainage and/or utility easement.
8. No water from any swimming pool shall be drained into the sanitary sewer or septic sewer system.
9. Private swimming pools located on the site of multiple-family dwellings which are intended for and used solely by the occupants of multiple-family dwellings shall have no part of the water surface less than 25 feet from any lot line.
10. All heaters shall be equipped with readily accessible on/off switch mounted outside of the heater to allow shutting off the heater without adjusting the thermostat.
 - Gas heaters shall not be equipped with constant burning pilot lights.
11. Time switches shall be installed on all heaters and pumps, built-in timers shall be deemed in compliance.
 - Except where public health standards require 24-hour pump operation and where pumps are required to operate solar and waste-heat-recovery pool heating systems.
12. Heated pools and inground permanently installed spas shall be provided with vapor-retardant cover, except pools deriving over 70% of energy for heating from site-recovered energy.

Applicant/Contractor Signature	Property Owner Signature
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DATE OF APPLICATION: ____/____/____

GENERAL INFORMATION

Site Address: _____ P.I.N.: _____
 Owner Name: _____ Phone: _____
 Owner Address: _____ Email: _____

BLDG USE			
<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential		
PERMIT TYPE (check all that apply)			
<input type="checkbox"/> Building	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Demolition

CONTRACTOR INFORMATION

<input type="checkbox"/> Property Owner	Building Contractor Name: Address: _____	License #: Phone: _____
<input type="checkbox"/> Property Owner	Plumbing Contractor Name: Address: _____	License #: Phone: _____
<input type="checkbox"/> Property Owner	Mechanical Contractor Name: Address: _____	Bond #: Phone: _____

Valuation of Work: _____
 Description of Work: _____

Residential ONLY - Square Footages:

Upper-Level	Main Level	Basement	Garage
Finished _____	Finished _____	Finished _____	Attached _____
Unfinished _____	Unfinished _____	Unfinished _____	Detached _____
Deck _____	Porch _____	# of Fireplace(s) _____	

I hereby apply for a building permit and acknowledge that the information included with the application is complete and accurate; that the work will be in conformance with the ordinances of the City of Victoria and with the MN State Building Code.

Signature of Applicant: _____ Date: ____/____/____

OFFICE USE ONLY

<p>Zoning Specifications:</p> <p>Front Setback _____ Rear Setback _____ Left Side Setback _____ Right Side Setback _____ Max. % Impervious Surface _____ Zoning Class R-PUD R-1 R-2 R-3 R-4 Other _____</p>	<p>Building Specifications:</p> <p>Permit Valuation: _____ Type of Construction: VB Other _____ Occupancy Type: IRC-1 Other _____ Fire Suppression: YES NO</p>
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Zoning Administrator Approval: _____ Date: ____/____/____

Comments: _____

Building Official Approval: _____ Date: ____/____/____

Comments: _____



Site Address:				
Lot	Block	Subdivision	Zoning	Total Lot Area
Property Owner		Phone # Email	Address (if different from above)	
Contractor/ Applicant		Phone # Email	Address	
Description of Proposed Project:				
Valuation of Work:				
Safety Fence: Must meet sec 30-80 (2) of the City of Victoria Code of Ordinances requirements				
<input type="checkbox"/> Height: _____	<input type="checkbox"/> Iron	<input type="checkbox"/> Plastic	<input type="checkbox"/> Chain-Link	<input type="checkbox"/> Other:
Tree Removal: Complete the section below if tree removal is planned				
Type of Plant to be Removed		Quantity	Proposed Removal Date	
<input type="checkbox"/> Live Trees Under 8' in diameter				
<input type="checkbox"/> Noxious Weeds				
<input type="checkbox"/> Dead Trees				
<input type="checkbox"/> Diseased Trees				
<input type="checkbox"/> Other				
<input type="checkbox"/> Live Trees 8" or greater in diameter: <i>Replacement Required</i> <i>Complete the Tree Removal and Replacement Reference for Homeowners Worksheet</i>		Quantity and Size:		
Replacement Plantings				
Types and Species		Quantity	Size	Proposed Installation Date
Submission Requirements: Please see the Swimming Pool Information Sheet for detailed survey submission requirements				
<input type="checkbox"/> Survey or site plan identifying existing and proposed improvements drawn to scale with required setbacks, showing: 13. Existing and proposed impervious surface area. 14. Setbacks and the distance of pool equipment to the nearest property line 15. If applicable, tree removal and replacement location <input type="checkbox"/> Signed and attached swimming pool information sheet				
<i>This is to certify that I am making an application for the described action by the City, and I am responsible for complying with all City requirements with regard to this request. This application should be processed in my name, and I am the party whom the City should contact regarding any matter pertaining to this application. I have attached a copy of proof of ownership (either copy of Owner's Duplicate Certificate of Title, Abstract of Title, or Purchase Agreement), or I am the authorized person to make this application and the fee owner has also signed this application.</i>				
<i>I will keep myself informed of the deadlines for submission of material and the progress of this application. I further understand that additional documents and information I have submitted are true and correct to the best of my knowledge.</i>				
<i>I hereby agree to reimburse the city for all expenses beyond the filing fee cost incurred reviewing and processing the application and materials submitted.</i>				
Applicant/Contractor Signature		Property Owner Signature		Date

Zoning Review Comments:	Approved by:	Date
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DATE REC'D: ____/____/____



This form must accompany a Zoning Permit Application if the structure is proposed to be located on the property line. All Neighbor objections must be made in writing to the Planning Department.

Site Address: _____
(Where proposed fence will be located)

Property Owner: _____

Address: _____
(If different from site address)

Phone Number: _____

Note: It is the responsibility of the applicant and / or property owner to maintain both sides of the fence so as not to create a nuisance (weeds, paint, rotting boards, etc.)

*** This is a signed agreement that must be disclosed with the property in an event of a future sale of property and all common properties in which the present owner(s) have signed and agreed to below



We, the undersigned, have discussed the proposed fence/retaining wall to be located on our common property line with the property owner and/or the applicant and have no objections to the construction of said fence/retaining wall. We have reviewed the plans of the proposed location and materials.

Common Property Line Owner (s):

Name of Property Owner (Print / Typewritten)	Address	Signature	Date