

Permit No. _____

**SWIMMING POOL BUILDING PERMIT APPLICATION
CITY OF MONROEVILLE**

125 East Claiborne Street

Monroeville, AL 36460

Phone No. 251-575-5511 Fax No. 251-743-3547

Owner: _____

Address of Pool: _____

Parcel No.: _____

Contractor: _____

State License No.: _____

Approximate Square Footage of Pool: _____

Water Depth of Pool: _____

Estimated Cost of Construction (labor plus materials): _____

Permit Fee: _____

Date work to be started: _____

Date of Permit: _____

Applicant's Signature: _____

Building Official: _____