

## Planning & Development Department Pool Requirements

All pools shall comply with the 2015 International Building Code along with various sections of the 2015 International Plumbing Code, 2017 National Electrical Code, and City of Fort Worth Amendments to each.

**Note:** For Apartment or Commercial pools plans must show fence or barrier, location of pool equipment, parking spaces, and stamped approval by the Health Department. Health Department approval can be obtained at Hazel Harvey Peace Center, 818 Missouri Ave, 817-392-7255.

Prior to permit submittal the plans must be stamped and signed off by Oncor Electric. This is to verify that the pool will not be placed under any electrical lines. The Indemnity and Release form must be completed, signed, and attached to the submitted plans.

Oncor review time is estimated at five (5) working days unless changes need to be made.

The pool areas are divided into East and West of Hwy 360.

**For Metro East: Greg Johnson @ 972-216-8926**

**For Metro West: Byron Spencer @ 817-861-7551**

### **Water Development Approval:**

At the time of Plan submittal you will need approval from the Water Department so that they can verify that the location of the pool is acceptable. They will stamp and sign the site plan for their approval. Water Development Department, 200 Texas St, 817-392-8250.

### **Submittal for Permit:**

1. Two (2) complete detailed sets of construction and site plans showing where the pool will be located in reference to the residence or business and must include:
  - a. Size
  - b. Depth
  - c. Dimensions
  - d. Site plan must show property lines and easements
  - e. Front, side, and rear yard setbacks
2. A completed copy of the Pool Entrapment Form (Residential only)
3. A copy of the legally certified plat (\*Residential- Only required if item "D" is not stamped by a licensed surveyor)

**Plats can be obtained at the Tarrant County Courthouse, 100 W Weatherford St, Deeds & Records Department, 817-884-1100.**

All plans must be drawn to scale, have a labeled "North Arrow" and contain the Legal Description of the property (Block, Lot, and Addition/subdivision) along with the correct street address.

Planning & Development Department [817-392-2222](tel:817-392-2222) or [DevCustomerService@fortworthtexas.gov](mailto:DevCustomerService@fortworthtexas.gov)

***It is the responsibility of the pool contractor/homeowner to call Texas Excavation Safety System (TESS) and request a utility line locate before pool plans are submitted.***

***Contact: 811 by phone or 800-DIG-TESS Online: Texas811.org***

# Private Residential Pool/Spa/Hot Tub

This form is required with all permit applications for Private Residential Site-Built Pool/Spa/Hot Tubs

Project Address: \_\_\_\_\_ Date: \_\_\_\_\_  
 Pool Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Pool Company, Responsible Individual: \_\_\_\_\_

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Maximum water depth: \_\_\_\_\_ Approx. # of gallons \_\_\_\_\_  
 Number of pumps: \_\_\_\_\_ \$ value: \_\_\_\_\_

Maximum Calculated flow of water in suction piping:

1. in any normal branch piping: \_\_\_\_\_ (Cannot exceed 3 feet per second)
2. in any branch piping when one outlet is blocked: \_\_\_\_\_ (Cannot exceed 6 feet per second)
3. in any other suction piping: \_\_\_\_\_ (Cannot exceed 8 feet per second)

Number of submerged

Covers/Grates: \_\_\_\_\_

Type used (check all that apply):

- Single unblockable
- Dual
- Three-or-more

Are any of the following used:

- Vacuum release systems
- SVRS systems
- Engineered vent systems

Based on the number of cover/grates per system, is the listed flow rate of the cover or grate rated at least (see table) of the maximum system flow rate? Yes or No.

Number of covers/grates	Rating of each cover/grate is at least as much as this % of the maximum system flow rate.	Check as applicable
1	100%	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	100%	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	66.7%	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	50%	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	40%	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	33.3%	<input type="checkbox"/> Yes <input type="checkbox"/> No

Signature: \_\_\_\_\_

**Inspection:** The inspector will perform a piping and outlet spacing inspection per ANSI/APSP/ICC 7-13 when doing the steel inspection.