



CHEROKEE COUNTY

Building Safety



110 Railroad Ave.
Gaffney, SC 29340

Office 864-487-2561

Fax 864-902-1100

SWIMMING POOL PERMIT APPLICATION

Permit # _____

Owner Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone _____ Email: _____

Parcel Number: _____

Contractor

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone _____ Email: _____

License Number: _____ Expiration Date: _____

Commercial (Need SCPE Stamped Plans) Residential

Pool Type: Inground Above Ground

Pool Size: _____ Height/Depth of Pool: _____

Description of Fence: _____

Any pool 24 inches or more in height/depth must be bordered by a fence at least 48 inches high with a self-closing locking gate.

Is the house part of the barrier for fence? (If yes, install the correct alarm system)

Yes _____ No _____

Neighborhood Covenant or HOA on this Property?

Yes _____ No _____ (Applicant to comply with these regulations)

Setback requirements for pools shall be the same as those for accessory structures

Fence Affidavit must be signed, notarized (by a South Carolina Notary), and attached to permit application.

Project Cost _____

Permit Cost _____ **Check** _____ **Cash** _____ **CC Type** _____

The undersigned hereby certifies that the above information is true and correct. The permit holder is to comply with all County, State, and Federal laws and ordinances.

Signature _____

Date _____



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RESIDENTIAL POOL FENCE AFFIDAVIT

As the owner of the property located at _____ in the County of Cherokee, I am aware of the requirements for the enclosure of a pool.

I take full responsibility, as the property owner, for ensuring that the pool fence or barrier is installed around the Pool during and after construction; Also, that the pool will not be filled with water until either a temporary fence or barrier is installed around the pool.

I further agree and acknowledge that a Final Inspection will not be made by the County of Cherokee Building Codes Office until the installation of a permanent fence is installed around such pool.

Owner(s) Name

Owner(s) Phone Number

Owner(s) Signature

Date

State of South Carolina
County of Cherokee

The foregoing instrument was acknowledged before me this date _____

By _____ (name of person acknowledged).

Sworn and subscribed before me this _____ day of _____, 20____

(Seal)

Notary Public of South Carolina

My Commission Expires: _____