




EDINA BUILDING SAFETY POLICY/INFORMATION			
Application Submittal Requirements <b>Swimming Pool Plan Requirements</b>		Edina City Code Sec.10-487	
subject		code reference	
Inspections Department		approval 	
department		approval	
SP026Bepr	07/03/2020	9/25/2014	1 of 2
policy number	revision date	effective date	page number



**Purpose:** Establish submission requirements at the time of permit application to enable accurate, timely review.

**Scope:** All new residential buildings and residential building additions

**Site Address:** \_\_\_\_\_

**Instructions:** Please fill out completely before uploading your plans. The Building Inspections Department can be reached at 952.826.0372 from 7:30am – 4:30pm Monday through Friday.

Required for Approval	Check if Submitted	General Items
Yes	<input type="checkbox"/>	1. Evidence of watershed's permit application to apply. <b>NOTE: Actual permit required for approval.</b> Nine Mile Watershed District : <a href="http://www.ninemilecreek.org">www.ninemilecreek.org</a> or Minnehaha Creek Watershed District: <a href="http://www.minnehahacreek.org">www.minnehahacreek.org</a>
Yes	<input type="checkbox"/>	2. Complete to scale plans and specs. Including: a) Plumbing diagram b) Diving board, if applicable c) Stairs, ladders and swim outs d) Skimmer locations e) Inlets f) Main drain g) Cross section diagram of the swimming pool h) Proposed pool decks
Yes	<input type="checkbox"/>	3. A site survey complying with <a href="#">City Survey/Site Policy</a> . a) Indicate a 14 foot setback from the water's edge to rear and side yard property lines b) Indicate a 10 foot setback from water's edge to utility lines, if applicable c) Indicate the location of recirculation equipment. A 10 foot setback from property lines is required d) Indicate the location of fencing, including any gates
Yes	<input type="checkbox"/>	4. Provide the following information: a) Make and model number of the filter and pump b) Type of filter (sand, D.D., cartridge) c) Designed flow rate of recirculation system d) Liquid capacity of the pool e) Type of handhold around the pool perimeter f) Make, model and description of chlorinator
Yes	<input type="checkbox"/>	5. Additional permit and inspections required for electrical work from the State
Yes	<input type="checkbox"/>	6. Additional mechanical permit and inspections required for pool heater and pool heater gas lines
Yes	<input type="checkbox"/>	7. Storm Water Management Plan & Erosion Control Plan per City Engineer requirements. Comply with <a href="#">Erosion and Sediment Control Policy</a> and <a href="#">Floodplain Development Policy</a> . <b>Contact the Engineering Department at 952-826-0371 for details.</b>
Yes	<input type="checkbox"/>	8. All swimming pools must have a four (4) foot wide, moisture impervious deck extending entirely around the pool. Concrete or its equivalent is acceptable.

Yes	<input type="checkbox"/>	9. Applicant shall be responsible for erecting and maintaining at least a four (4) foot in height fence with self-closing, self-latching gate(s) installed around the pool.
Yes	<input type="checkbox"/>	10. Call for the following required inspections when ready: a) Footing: Before pouring, Call Inspections Department at 952-826- 0372 b) Electrical: Call State Electrical Inspector Office at 763-205-5015 c) Air test, pool heater and gas piping Call Inspections Department at 952-826-0372 d) Final swimming pool inspection: Call Health Department at 952-826-0370 e) Call for a Building Final at 952-826-0372
Yes	<input type="checkbox"/>	11. Tree Protection Plan required per <a href="#">Ordinance No. 2014-25</a>
Yes	<input type="checkbox"/>	12. Swimming pool may not be filled without fencing in place
Yes	<input type="checkbox"/>	13. Swimming pool may not be used before final inspection approval.

Plans will be reviewed and approved by the Planning, Engineering and Building Department. Plan review time will vary, but in all cases permit applicants should allow at least two weeks of plan review time if and when all the correct information is dropped off.

*I acknowledge that the items checked on the list above are included on or with the submitted plans:*

Contractor: \_\_\_\_\_ Contact person: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email \_\_\_\_\_

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