



## Washington County Permits & Inspections Affidavit & Swimming Pool Certificate of Compliance

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In accordance with Section 105.1 of the 2006 International Residential Code/2006 International Building Code, the property owner hereby grants the authorized representative to make a building permit application for a swimming pool.

The undersigned certifies that all construction involving the installation of the residential swimming pool will be in full compliance of the Washington County Swimming Pool Booklet.

The undersigned further certifies that all necessary inspections will be scheduled in accordance with the schedule set forth in the Washington County Swimming Booklet and that the Dept. of Permits & Inspections will be notified to perform the final inspection prior to the use of the pool. The undersigned also certifies that the swimming pool will not be used or occupied until a Use & Occupancy Certificate has been issued. If the pool is occupied prior to all the required inspections, the undersigned acknowledges a civil citation may be issued, providing for a fine of One Hundred Dollars (\$100.00) per day, from the date of the issuance of the citation for each and every day of the violation.

This office does not enforce covenants or deed restrictions and it is the owner's, builder's and/or developer's responsibility to make sure the covenants and/or deed restrictions are not being violated as a result of the issuance of this permit.

### **OWNER:**

\_\_\_\_\_  
Property Owner's Name (Please Print)

\_\_\_\_\_  
Property Owner's Address

\_\_\_\_\_  
Property Owner's City, State, Zip Code

\_\_\_\_\_  
Property Owner's Signature

### **PLEASE SIGN AND RETURN TO:**

Department of Permits & Inspections  
80 West Baltimore Street  
Hagerstown, Maryland 21740  
Phone No: 240-313-2460  
Fax No: 240-313-2461 (Fax)

### **AUTHORIZED REPRESENTATIVE:**

\_\_\_\_\_  
Authorized Representative's Name (Please Print)

\_\_\_\_\_  
Authorized Representative's Address

\_\_\_\_\_  
Authorized Representative's City, State, Zip Code

\_\_\_\_\_  
Authorized Representative's Signature