



**CITY OF PALMHURST**  
 4417 N. SHARY ROAD  
 PALMHURST, TEXAS 78573  
 (956) 583-8697 – FAX (956) 581-4630

**Application for Swimming Pool / Sprinkler Permit**

Submit completed form with any rise / load calculations & site plans / specs.  
 Design seal if applicable

Swimming Pool       Sprinkler ( Yard / Landscape / Irrigation)       Fire Protection Sprinkler

Contractor Business:			
Address:		City, State, Zip:	
Work Phone:	Cell Phone:	Fax:	
Home Owner's Name:	Last:	First:	
Address:			
Work Phone:		Cell Phone:	
Construction Address:			
Subdivision:		Phase / Block:	Lot:
Proposed Improvement:			Valuation: \$
<p>The foregoing is a true and correct description of the improvements contemplated by the undersigned applicant and the applicant states that he / she will have full authority over the installation mentioned above, and hereby agrees to comply with all ordinances of the City of Palmhurst and applicable State Laws governing your prospective trade, and assumes all responsibility for such compliance. I also understand that the permit shall only be valid for a period of one year from the date of issuance, and shall be the responsibility of the undersigned to renew any and all applicable permits in order to resume the installation.</p>			
Signature of Owner or Authorized Agent:			

The City of Palmhurst requires a confirmation / acknowledgement of installation on all yard / landscape irrigation ( sprinkler ) systems / swimming pools and a description of a code approved back flow prevention device from the **SHARYLAND WATER SUPPLY CORPORATION**, before a yard / landscape irrigation ( sprinkler ) system / swimming pool permit will be issued

**Sharyland Water Supply Corporation Licensee:**

We confirm / acknowledge the installation of the above mentioned / addressed yard / landscape irrigation ( sprinkler ) system.

**Description of a code approved back flow prevention device :**

<b>FOR OFFICIAL USE ONLY</b>	
Received by:	Date:
Planning Department:	Date:
City Manager	Date: