



## COUNTY OF LOUISA

DEPARTMENT OF COMMUNITY DEVELOPMENT

Phone (540) 967-3430 Fax (540) 967-3486

[www.Louisacounty.com](http://www.Louisacounty.com)

1 Woolfolk Avenue  
P.O. Box 160  
Louisa, Virginia 23093

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# Pool / Hot Tub Permit Package



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**Permit Application Instructions**  
**Pool / Hot Tub**  
**PLEASE RETAIN FOR YOUR RECORDS**

**Permit Application Instructions**

- All areas of this packet must be completed; all forms and items required for submittal must be complete prior to application being accepted.
- Items required for permit submittal are identified on page 3 of this packet.

**Permit Review Process**

Once all required submittals are completed and submitted, review steps are as follows:

1. Submittal Review – Verification that all required submittals are present and completed properly.
2. Zoning Review – Ensures the project is taking place within the buildable area of the property; confirmation of property information including Tax Map #, Zoning District, and setback requirements. **FOUNDATION SURVEY** and **SETBACK CERTIFICATION** requirements are determined at this review.
3. Shoreline Review – If property is located on Lake Anna, comprehensive review of shoreline packet requirements (separate packet) will be completed.
4. Building Plan Review – Comprehensive review of project plans will be completed to ensure all structural elements are identified and will meet all current building codes.
5. Final Review – Ensures all requirements have been satisfied.
6. Permit Issuance – Community Development staff will inform primary contact when permit is ready for issuance. All fee balances are due at permit issuance.

**Inspection Requirements - SAME-DAY INSPECTIONS ARE NOT AVAILABLE**

If using a 3<sup>rd</sup> party inspector, the following conditions apply:

- Must be on Louisa County’s approved 3<sup>rd</sup> party inspectors list
- Must notify Louisa County prior to any 3<sup>rd</sup> party inspection
- Must submit inspection result within 72 hours of inspection

Required inspections are as follows (as applicable):

- Footing Inspection  
**\*\*\* All 3<sup>rd</sup> party inspections must be submitted before moving forward \*\*\***  
**\*\*\* If required, Foundation Survey must be submitted and approved before moving forward \*\*\***
- Pour Inspection
- Bonding, Grounding, Rough-In Electric, Rough-In Plumbing Inspections
- Perimeter Slab Inspection
- Barrier Inspection  
**\*\*\* If required, Setback Certification or Final Survey must be submitted and approved before moving forward \*\*\***
- Final Inspection



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**Schedule of Fees**

**Pool / Hot Tub**

**FEES DUE AT PERMIT ISSUANCE**

**Zoning Fees**

- Zoning Review Fee \$ 25.00

**Building Fees**

2% State Fee will apply to the following:

- Swimming Pools / Hot Tubs \$150.00  
(includes electrical & fencing)
- Pool Fencing Only \$ 35.00
- Pool Electrical Only \$ 35.00

**Additional Fees**

- Permit Renewal \$ 50.00
- Working without a permit 50% of the permit fee - \$100.00 minimum
- Re-inspection Fees:
  - 1<sup>st</sup> Failed Inspection \$ 20.00
  - Additional Failed same issue \$ 25.00
  - Not Ready when inspector Arrives \$250.00



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# Submittal Requirements

## Pool / Hot Tub

### INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED

#### Required forms and submittals provided by applicant or applicant's contractor:

- Deed/Recordation Receipt** - if the property is not listed in the applicants' name
- Plat of property** - must include either an engineered plan or a drawn-to-scale plan showing building location and include the following elements:
  - Location of all structures including decks, porches, and other attachments
  - Dimensions of all structures
  - Setback measurements for all structures - if your proposed structure appears to be within 20 feet of the minimum setbacks, a foundation survey and/or setback certification will be required. Setbacks are measured from the closest point of the structure (including any attachments) to the closest point of the property line or assumed right-of-way.
- Building Plans** - 2 complete sets
  - Scaled or fully dimensioned and shall bear the name, address, and contact information of the designer
  - Plans shall be house-specific and only contain details, specs, etc. for that specific site; no generic, non-specific plans will be accepted
  - Must include all attachments, decks, porches and overhangs
- State Contractor's License** (or Contractor License Exemption form in lieu of License)
  - State Contractor's License must include applicable trades
- Louisa County Business License** (not required if submitting Contractor License Exemption form)

#### Additional submittals that may be required:

- Shrink/Swell Report** - required due to the soil conditions if the property is located in one of the following tax map numbers:  
10, 17, 21, 22, 36, 37, 38, 42, 45, 46, 47, 51, 53, 54, 55, 56, 61, 63, 67, 73, 74, 83, 84, 88, 89, 97
- Soil Bearing Report** - required if the Shrink/Swell Report identifies a need for additional structural requirements or design
- Town of Louisa or Town of Mineral Zoning Approval** - if building within town limits



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**Development Permit Application  
Pool / Hot Tub**

**Contact Information**

Property Owner: _____	Phone #: _____
Address: _____	Email: _____
City, State, Zip: _____	
Contractor Name: _____	Phone #: _____
Contractor Address: _____	Email: _____
City, State, Zip: _____	
Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Contractor <input type="checkbox"/> Agent	

**Project Location and Property Information Details**

Property Address (if applicable): _____	
Tax Map #: _____	Magisterial District: _____
Zoning District: _____	Subdivision: _____
Present Acreage: _____	Acreage of Disturbance: _____
Existing structures on property: _____	
Deed/Plat Book: _____	Page: _____
Directions to property from County Office Building: _____ _____	
Proposed Setbacks: Front* _____ Rear _____ Left Side _____ Right Side _____	
* Front setback is measured from the edge of the right-of-way	
Acknowledged By: _____	

I declare that the statements made and the information given on this application are true, full, and correct to the best of my knowledge and belief, and I agree to conform to all Zoning and Building Regulations. I give my permission for County staff to enter onto this property for appropriate inspections. I also acknowledge the comments made by the Zoning Administrator or designated agent and the setback requirements stated on this form and/or permit. I further understand that an authorized agent of Louisa County may require a foundation survey or setback certification for compliance at any time during the construction process or prior to issuance of a Certificate of Occupancy.

Acknowledged By (print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner or Authorized Agent: \_\_\_\_\_



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**Construction Information Sheet**  
**Pool / Hot Tub**

Building Details – Fill out all applicable areas

Job Value \$ \_\_\_\_\_

Dimensions of Pool: \_\_\_\_\_

Above Ground     In-Ground     Hot Tub

Pool Depth: \_\_\_\_\_

Type of Barrier (Fencing or other): \_\_\_\_\_

Electrical work included with this permit:  Yes     No





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**Contractor Information Sheet**  
**Pool / Hot Tub**

Fill out either the Contractor License Exemption OR Owner/Agent Affidavit

**Contractor License Exemption-** The property owner will be acting as the contractor and is responsible for work performed onsite.

*I affirm that I am the owner of a certain tract or parcel of land listed below and that I have applied for a building permit. I affirm that I am familiar with the prerequisites of §54.1-1111 and §54.1-1101 of the Code of Virginia and I am not a contractor or subcontractor.*

Owner(s) Name: \_\_\_\_\_  
Address or Tax Map #: \_\_\_\_\_  
Signature of Owner(s): \_\_\_\_\_

**Notice: Per §54.1-1101, Exemptions:** *The property owner of a commercial, industrial, or manufacturing facility is only allowed this exemption for repairs or improvements to the existing structure(s). New structures, including additions are not included in this exemption. The property owner shall be a properly licensed contractor or employ a properly licensed contractor per §54.1-1103 of the Code of Virginia.*

**- OR -**

**Owner/Agent Affidavit-** The property owner has hired a contractor to perform work for this project. Contractor information will be verified.

*I hereby certify that I/we, owner(s) of record, authorize the below referenced person/contractor/RDP to submit this application as my/our authorized agent.*

Owner(s) Name: \_\_\_\_\_  
Address or Tax Map #: \_\_\_\_\_  
Signature of Owner(s): \_\_\_\_\_

Contractor

Contractor/Company/Agent Name: \_\_\_\_\_  
Virginia Contractor's License #: \_\_\_\_\_  
License designation(s), e.g. CBC/RBC/ELE: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_  
Signature of Contractor/Agent: \_\_\_\_\_

Tradesman (optional)-

Electrical:	_____	_____	_____	_____
	Company/Owner	Phone Number	License Number	Signature
Plumbing:	_____	_____	_____	_____
	Company/Owner	Phone Number	License Number	Signature
Mechanical:	_____	_____	_____	_____
	Company/Owner	Phone Number	License Number	Signature
Gas (interior):	_____	_____	_____	_____
	Company/Owner	Phone Number	License Number	Signature



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**Zoning Approval & Requirements**

**Pool / Hot Tub**

**Staff Use Only**

Zoning Permit # \_\_\_\_\_ Building Permit # \_\_\_\_\_

Required Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side \_\_\_\_\_

Proposed Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Left Side \_\_\_\_\_ Right Side \_\_\_\_\_

Foundation Survey Required:  Yes  No Setback Certification Required:  Yes  No

Existing CUP/SEP/Variances: \_\_\_\_\_ Flood Zone  Yes  No

Minimum Lot Width: \_\_\_\_\_ Maximum Building Height: \_\_\_\_\_

Comments by Zoning Administrator: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Approved by Zoning Administrator or

Designated Agent: \_\_\_\_\_ Date: \_\_\_\_\_