Department of Environment and Natural Resources Division of Environmental Health

STATE IDaaaaaaaaaaaaaa

APPLICATION FOR PUBLIC SWIMMING POOL OPERATION PERMIT

Listed below is information for your public swimming pool. This information'b ww' be updated annually. If there are any changes for the upcoming season, please strike through the information and write in the current information to the right side.

Pool Name: Pool Address Pool City, State Zip Telephone

OWNER INFORMATION:

Pool Owner Owner Contact Owner Address Owner City, State Zip Owner Telephone

POOL OPERATOR INFORMATION: (List additional operators to the side)

Operator Name
Operator Address
Operator City, State Zip
Operator Telephone
Operator Number
Trained by

POOL OPERATION INFORMATION:

Constructed/Remodeled Before or After May 1, 1993:

COMPLETE THE FOLLOWING PRIOR TO RETURNING THE APPLICATION

le one) Chlorine Bromine Biguanide
Opening Date Closing Date April 1 or remaining open after October 31 are considered year round pools)
Opening Time Closing Time
TED BY:
Signature Typed or Printed Name
Date://
April 1 or remaining open after October 31 are considered year round pools) Opening Time Closing Time TED BY: