

## APPLICATION FOR PUBLIC SWIMMING POOL OPERATION PERMIT

*Listed below is 2013 information for your public swimming pool. This information must 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*

### POOL INFORMATION:

Pool Name  
Pool Address  
Pool City, State, Zip  
Pool Telephone  
Pool Email

### OWNER INFORMATION:

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

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

Operator Name  
Operator Address  
Operator City, State, Zip  
Operator Telephone  
Operator Cell Phone  
Operator Number  
Train by

### POOL OPERATION INFORMATION:

Constructed/Remodeled Before or After May 1, 1993: AFTER

#### COMPLETE THE FOLLOWING PRIOR TO RETURNING THE APPLICATION

Type of Disinfection: (circle one) Chlorine Bromine Biguanide

Dates of Operation: Opening Date \_\_\_\_\_ Closing Date \_\_\_\_\_

(NOTE: Pools opening prior to April 1 or remaining open after October 31 are considered year round pools)

Hours of Operation: Opening Time \_\_\_\_\_ Closing Time \_\_\_\_\_

### APPLICATION SUBMITTED BY:

Owner or Operator: \_\_\_\_\_  
*Signature* *Typed or Printed Name*

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_