**WEBER-MORGAN DISTRICT HEALTH DEPARTMENT**

**477 23rd STREET, OGDEN, UTAH 84401**

**TELEPHONE: (801) 399-7160 FAX: (801) 399-7170**

**APPLICATION FOR SWIMMING POOL PERMIT**

**Year round fee: $450 + $250 each additional pool/spa**

**Seasonal fee: $250 per pool/spa**

**Plan review: $485 for new or remodeled pool/spa**

**ESTABLISHMENT NAME**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ESTABLISHMENT ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(FULL ADDRESS IS REQUIRED) STREET NAME/NUMBER CITY ZIP CODE

**POOL OPERATOR’S NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PHONE#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OWNER**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (FULL ADDRESS IS REQUIRED) STREET NAME/NUMBER CITY ZIP CODE

**PARTY TO RECEIVE**

**CORRESPONDENCE/INVOICES**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (FULL ADDRESS IS REQUIRED) STREET NAME/NUMBER CITY ZIP CODE

**PARTY TO RECEIVE**

**BACTERIOLOICAL RESULTS**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(FULL ADDRESS IS REQUIRED) STREET NAME/NUMBER CITY ZIP CODE

**FACILITY INFORMATION:**

**(check type of pool and complete information for each individual pool)**

**TYPE OF POOL (1):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_\_\_ WIDTH: \_\_\_\_\_\_\_ DEPTH: \_\_\_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_

WATER SUPPLY: PUBLIC \_\_\_\_\_ PRIVATE WELL \_\_\_\_\_ PRIVATE SPRING \_\_\_\_\_

**TYPE OF POOL (2):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_\_\_\_

WATER SUPPLY: PUBLIC\_\_\_\_\_ PRIVATE WELL\_\_\_\_\_ PRIVATE SPRING\_\_\_\_\_

**TYPE OF POOL (3):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_\_\_\_

WATER SUPPLY: PUBLIC\_\_\_\_\_ PRIVATE WELL\_\_\_\_\_ PRIVATE SPRING\_\_\_\_\_

**TYPE OF POOL (4):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_\_\_\_

WATER SUPPLY: PUBLIC\_\_\_\_\_ PRIVATE WELL\_\_\_\_\_ PRIVATE SPRING\_\_\_\_\_

**TYPE OF POOL (5):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_\_\_\_

WATER SUPPLY: PUBLIC\_\_\_\_\_ PRIVATE WELL\_\_\_\_\_ PRIVATE SPRING\_\_\_\_\_

**TYPE OF POOL (6):**  \_\_\_\_\_OPEN YEAR AROUND \_\_\_\_\_SEASONAL

\_\_\_\_\_OUTDOOR SWIMMING/WADING \_\_\_\_\_INDOOR SWIMMING/WADING

\_\_\_\_\_OUTDOOR HOT TUB \_\_\_\_\_INDOOR HOT TUB

\_\_\_\_\_OTHER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Specify type)

DISINFECTANT USED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FILTER TYPE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

POOL DIMENSIONS: LENGTH: \_\_\_\_\_ WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_

CAPACITY IN GALLONS: \_\_\_\_\_\_\_\_\_

WATER SUPPLY: PUBLIC\_\_\_\_\_ PRIVATE WELL\_\_\_\_\_ PRIVATE SPRING\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I understand that a representative of the Weber-Morgan District Health Department must perform periodic inspections in order to maintain this permit, and that this permit may be suspended or revoked for non-compliance with the Weber-Morgan District Regulations On The Design, Construction, and Operation of Public Swimming Pools.

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

Signature of Applicant Date

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