

Georgia Department of Public Health

Application for Swimming Pool, Spa and Recreational Water Park Construction Permit

Complete in duplicate and forward the original to the County Health Department in which the facility is located.

Name of Facility: _____

Check Appropriate Block(s): Swimming Pool Spa Recreational Water Park

New Plans/Blueprints provided Renewal/Existing

Special Purpose Pool (if checked please check the type pool)

Activity/Interactive/Wading Pool Continuous Water Course

Dual Use Pool Falling-Entry Pool Wading Pool Wave Pool

Zero-Depth Entry Pool Zero-Depth Pool Other _____

Facility Address: Street, Highway, or RFD	City	County	State	Zip Code
Facility Owner's Name	Phone #	2 nd Phone #	Fax #	Email
Facility Owner's Mailing Address	City	County	State	Zip
Authorized Agent Name	Phone #	2 nd Phone #	Fax #	Email
Name of Contractor	Phone #	2 nd Phone #	Fax #	Email
Contractor Address: Street, Highway, or RFD	City	County	State	Zip Code

Construction Date: _____

Person to call if an English speaking employee is not at the facility during the inspection:
Name: _____ Phone number: _____

Is your facility served by well or public water ?
Is your facility served by septic tank or public sewer ?

It is the responsibility of the applicant to verify with other State or County departments (i.e. Business License, Planning & Zoning, Building Inspection) to insure all regulations are met.

The undersigned hereby applies for a permit to construct a public swimming pool, spa, or recreational water park pursuant to the OCGA 31-45-1, et seq.

Signed _____ (State whether Owner or Authorized Agent for the Owner) _____ Date _____

For Office Use Only					
Plans received	Review fee paid	Construction permit fee paid	Review comments sent to contact	Revised plans received	Plans approved

Construction permit #: _____
Not Valid Without Public Health Seal