



**Georgia Department of Public Health
Environmental Health Branch
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.

1. Name of Facility: _____
2. Construction Type: New Construction Remodeling Existing Facility Converting Pool to Public Use
3. Pool Type: Select appropriate type below: *(check if part of a Recreational Waterpark)*
 - Swimming Pool Spa Special Purpose Pool Recreational Water Park Attraction
(If special purpose is checked, please mark the pool type below)

Activity <input type="checkbox"/>	Continuous Water Course <input type="checkbox"/>	Diving Pool <input type="checkbox"/>	Dual Use Pool <input type="checkbox"/>
Interactive Water Play Pool <input type="checkbox"/>	Landing Pool <input type="checkbox"/>	Leisure River <input type="checkbox"/>	
Wading Pool <input type="checkbox"/>	Wading Interactive Pool <input type="checkbox"/>	Wave Pool <input type="checkbox"/>	Other <input type="checkbox"/> _____
3. Plans and Specifications included: (check appropriate block(s):
 - 2 Sets of Plans Hydraulic Analysis Worksheet Equipment specification sheets
4. Address of Facility: _____ Ga.

Street, Highway, or RFD	City	County	Zip Code	
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5. Physical Location of Facility: _____
 (GPS, LAT/LONG, or PLAT indicating physical location)
6. Facility Owner Name: _____ Phone Number: _____
7. Facility Owner Address: _____

Street, Highway, or RFD	City	County	Zip Code	State
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8. Construction Date: _____ Construction Permit # _____
9. Date Operation to Begin _____ Date Operation to End _____
11. Hours of Operation: Opening Time _____ am/pm Closing Time _____ am/pm
12. Type of Disinfectant: Inline Electrolytic Generator Calcium Hypochlorite Sodium Hypochlorite
 Trichlor Bromine UV Ozone Other _____

The undersigned hereby applies for a permit to operate a public swimming pool, spa, or recreational water park pursuant to the O.C.G.A. 31-45-1, et seq. and hereby certifies that he has received a copy of the Rules for Swimming Pools, Spas and Recreational Water Parks, Chapter 511-3-5, Georgia Department of Public Health.

If applicable¹, the undersigned filed a notarized affidavit and a copy of identifying documentation to prove residency status.

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

* Trained Operator means the person to whom the Business Owner has delegated responsibility for the overall water quality, safety conditions, emergency procedures, maintenance and record keeping of the swimming pool facility. This person must complete a state approved pool operator's course. ¹ Only public swimming pools that are associated with a commercial operation such as a tourist accommodation, health club or YMCA must comply. State, local and municipal public swimming pools are exempt.