



POOL AND SPA PERMIT APPLICATION

Waco-McLennan County Public Health District
Environmental Health Division

Mailing: 225 West Waco Drive, Waco, TX 76707

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PLEASE READ ENTIRE APPLICATION AND FILL IN ALL BLANKS COMPLETELY.
FAILURE TO DO SO CAN RESULT IN DELAYS.

Application is hereby made for a permit to operate a public or semi-public swimming pool or spa. By this application it is agreed that the permit holder, its representative, and applicant will comply with the local city ordinances or County order including supervision, maintenance, operation, and safety of the pool or spa. It is further agreed that inspectors of the Health District are authorized and empowered to enter upon and make inspections of the premises of the permit holder while the pool/spa is in operation or use and at any other reasonable time.

Name of Facility: _____

Name of Corporation (if applicable): _____

Owner's Name: _____

Person Responsible: _____ Title: _____

Email Address: _____

Street Address: _____

Street City State Zip Code

Mailing Address: _____

Street City State Zip Code

Phone Number: _____ Emergency Number: _____

Number of: Pool: _____ Spa: _____ Wading Pool: _____

Pool Operator: _____

Operating Season: _____

Upon receipt of this application and payment of fee, the Health District shall inspect the facilities to determine compliance with the provisions of applicable regulations. When in compliance, a permit shall be issued to the applicant. Said permit shall be valid for one year unless revoked or suspended. Operating without a valid permit is a violation of city ordinance or County order. If paying by check, please make it payable to "City of Waco".

Date of Application Applicant Signature Applicant Name (Printed)

Office Use Only

Notes: _____ EnerGov _____ File/Label _____ Copy to Inspector