



Swimming Pool Permit Application

Noble County Health Department

2090 N State Road 9, Suite C

Phone: (260)-636-2191

Albion, IN 46701

Please complete the information requested and return with the required fee payable to the Noble County Health Department. The fee for annual permit is \$200.00 and fee for seasonal permit is \$100.00. **There is NO permit fee for non-membership-based not-for-profit organizations.** All permits will be subject to an additional late penalty charge of (25%) of the Permit fee if submitted after January 1st.

Permits are NOT transferable and must be displayed in accordance to the Noble County Public Pool Ordinance.

Name of Establishment _____

Establishment Address _____ City _____ State _____ Zip _____

Permit Mailing Address _____ City _____ State _____ Zip _____

E-Mail Address _____ Establishment Phone # _____

Name of Owner _____ Owner's Phone # () _____

Owner's Address _____ City _____ State _____ Zip _____

Owner's Email _____ Owner's Cell # _____

Owner's Signature _____ Date _____

Certified Personnel Name _____ Certification # _____

Pool Name _____ Season of Operation _____

Pool Size (Gallons) _____ Pool Shape _____ Water surface area (sq.ft.) _____

Deck Area (sq.ft.) _____ Pool Enclosure: Indoor Indoor/Outdoor Outdoor Type _____

Maximum Bather Load _____ Water Supply: Public Well Surface Water

Disinfectant Type _____ Turnover Rate (hours) _____ Filter Type _____

Backwash Discharge: Ground Public Sewer Other _____ Suction Outlets: YES NO

FEES ARE NOT REFUNDABLE! Make checks payable to NOBLE COUNTY HEALTH DEPARTMENT

Applications are due by January 1st, 2025 to avoid a late fee.

☐ Non-Profit Organization (IRS 501) certificate and/or State Income Tax Exemption Certificate must be accompanied by a completed application. There is NO fee charged for Non-Profit Organization.

Sign _____ Date _____

Receipt # _____

Permit Mailed: _____