

**WAYNE COUNTY HEALTH DEPARTMENT  
100 S 5th STREET  
RICHMOND, INDIANA 47374  
(765) 973-9245**

**APPLICATION FOR SWIMMING AND WADING POOL OPERATION**

NAME OF POOL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

NAME OF OWNER/OPERATOR : \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

TELEPHONE/POOL: \_\_\_\_\_ TELEPHONE/OWNER/OPERATOR: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_

PUBLIC & SEMI POOL SERVICES	AMOUNT
Public and Semi-Public Pool License (12 months)	\$250.00
Public and Semi-Public Pool License (Seasonal- 6 months or less)	\$ 200.00
Wading Pool, Spa, and Diving Pool (12 months)	\$ 175.00
Wading Pool, Spa, and Diving Pool (Seasonal- 6 months or less)	\$ 150.00

IT SHALL BE UNLAWFUL FOR ANY PERSON TO OPERATE A PUBLIC SWIMMING AND WADING POOL, WHO DOES NOT POSSESS A VALID PERMIT FROM THE HEALTH OFFICER.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

ACCEPTED DATE: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

REJECTED DATE: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_