

North Central District Health Department

- Enfield - 31 North Main Street, Enfield, CT 06082 - (860) 745-0383 FAX 745-3188
- Vernon - 375 Hartford Turnpike, Room 120, Vernon, CT 06066 - (860) 872-1501 FAX 872-1531
- Windham - Town Hall, 979 Main Street, Willimantic, CT 06226 - (860) 465-3033 FAX 465-3032
- Stafford -Town Hall, 1 Main Street, Stafford Springs, CT 06076 - (860) 684-5609 FAX (860) 684-1768

PUBLIC SWIMMING POOL OPERATION PERMIT APPLICATION

Location of Pool: _____

Address of Pool: _____

Mailing Address: _____

OWNER INFORMATION:

Owner's Name: _____ Phone No. _____

Address of Office: _____

Contact Person: _____ Phone No. _____

Person Responsible for Operation of Pool: _____

Home Address: _____ Home Phone No. _____

POOL INFORMATION:

Hours of Operation - From: _____ To: _____

Type: Indoor _____ Outdoor _____ Whirlpool _____ Other _____

Capacity: Gallons: _____ Occupancy Load: _____ **Type of Water Supply:**

Type of Filtration: (Sand, DE, etc.) _____ **Public** _____ **Well** _____

Type of Disinfection System: _____

Any Pool Equipment Changes (i.e., filters, pumps, etc.): _____

Is Anti-Entrapment Main Drain Cover Installed? Yes _____ No _____

FEE - \$150.00 PER POOL, PER YEAR	
License No. _____	
Date: _____	Receipt No. _____

Date: _____

Owner's Signature _____