



FOR OFFICIAL USE ONLY	
Inspection Date: _____	
Approved _____	Denied _____

**SWIMMING POOL/SPA PERMIT APPLICATION  
PUBLIC/SEMI-PUBLIC**

New Application     Change of owner     Permit Renewal     Other \_\_\_\_\_

**Facility Information**

*Please Print Legibly*

Name of Property: _____	<input type="checkbox"/> Individual	<input type="checkbox"/> Firm	<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership
Address: _____				
Property Owner: _____	Street _____	City _____	State _____	Zip _____
Owner Address: _____	Street _____	City _____	State _____	Zip _____
<input type="checkbox"/> Apartment <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Health Club <input type="checkbox"/> School/Institution <input type="checkbox"/> HOA <input type="checkbox"/> Other				

**Operator Information**

Property Manager/Rep: _____	Phone: _____
Address: _____	
Street _____	City _____ State _____ Zip _____
Certified Pool Manager: _____	Certificate #: _____

City of Greenville Code requires persons operating public or semi-public pools/spas to employ a Certified Pool Operator (CPO). HOA's with semi-public pools may employ off premise management companies, but they are still required to be a CPO. (Sec 10.04.065)

**Pool/Spa Information**

# of Pools: _____	#gallons each: _____	# of Spas: _____	#gallons each: _____
Disinfectant Used: _____		Filter equipment used: _____	
Pool/Spa Locations: _____			

Permit Fees: First public/semi-public pool/spa                      \$100.00  
 Each additional public/semi-public pool/spa                      \$ 50.00

**NOTICE TO APPLICANT:**

*Incomplete applications will not be processed.*

Permits to operate public/semi-public pool/spa will not be issued until application and permit fee are received, and an opening inspection performed by the health authority. Fees will not be charged for a government agency, independent school district, institution of purely public charity or a church, but they are subject to all other provisions. The permit is non-transferable, valid for one year from date of issuance, and must be posted.

In consideration of this permit, I understand and agree to familiarize myself and comply with all laws and ordinances applicable to operation of said business and further agree to permit unrestricted access to an authorized representative of the City of Greenville for the purpose of inspection(s) necessary to verify compliance with applicable regulations. I certify that the submitted information is correct and I fully understand that any deviation from the above, without prior permission from the regulatory authority, may nullify the permit.

\_\_\_\_\_  
Signature of Owner or Agent    Title    Date

\_\_\_\_\_  
TX Driver's License # or TX ID #    Date of Birth