



Washington County Health Department

1302 Pennsylvania Avenue, Hagerstown, MD 21742

washcohealth.org
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APPLICATION FOR ANNUAL SWIMMING POOL- SPA/HOT TUB - BATHING BEACH OPERATING PERMIT

<input type="checkbox"/> Apartment	<input type="checkbox"/> Community	<input type="checkbox"/> School
<input type="checkbox"/> Camp	<input type="checkbox"/> Condominium	<input type="checkbox"/> Spa
<input type="checkbox"/> Club	<input type="checkbox"/> Motel/Hotel	<input type="checkbox"/> Other (Specify) _____
Application to Operate: (Check all that apply)	<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor
	<input type="checkbox"/> Spa/Hot Tub	<input type="checkbox"/> Bathing Beach
		<input type="checkbox"/> Swimming Pool
		<input type="checkbox"/> Wading Pool

FACILITY

NAME (As it will appear on permit) _____	TELEPHONE _____
STREET ADDRESS _____	TELEPHONE - CELL _____
CITY/STATE/ZIP _____	EMAIL ADDRESS _____

Permit Mailing Address _____
STREET ADDRESS

CITY/STATE/ZIP

OWNERSHIP

INDIVIDUAL _____

Individual Owner Name

CORPORATION	Corporation Name _____	Name of Corporation President _____
	Street Address _____	Telephone _____
	City/State/Zip _____	Email Address _____

Pool Management Company/Certified Operator _____

Days and Hours of Operation _____

Telephone Number of Pool/Spa/Beach _____

Date

Signature of Owner/Agent

Office use only

Rev July 2018

RECEIPT NO _____ PERMIT NO _____ DATE ISSUED _____

ENVIRONMENTAL HEALTH

240-313-3400 Voice • 240-313-3391 TDD • 240-313-3424 Fax