POP#

For Office Use Only

JOHNSON COUNTY ENVIRONMENTAL DEPARTMENT

Sanitation Division

April 1, 2008-March 31, 2009 Application for Operating Permit of a Swimming Pool, Spa, and/or Beach Area

Annual Fee: $262.50

(Return the completed form and payment to Johnson County Environmental Department, 11811 S. Sunset Drive, Suite 2700, Olathe, Kansas 66061)

Check form of payment enclosed: □ Money Order □ Cash □ Check

Mailing/billing address for the pool is: □ Facility Address □ Owner Address

Facility:

Name:_____ Gate Combination (if applicable):_____

Address:_____
Street City State Zip

Pool Licensed Operator (PLO):

Name:_____ PLO #:_____

Mailing Address:_____
Street City State Zip

Phone:_____ Cell:_____ E-mail Address:_____

Owner Information:

Name:_____ E-mail Address:_____

Mailing Address:_____
Street City State Zip

Phone:_____ Fax:_____ Cell:_____

Other Contact Available During the Day:

Name:_____ E-mail Address:_____

Mailing Address:_____
Street City State Zip

Phone:_____ Fax:_____ Cell:_____

Current Facility Types and Times Open:			How Many
Swimming Pool:	Seasonal ____	All Year ____	____
Spa:	Seasonal ____	All Year ____	____
Wading Pool:	Seasonal ____	All Year ____	____
Other:	Seasonal ____	All Year ____	____

Anticipated pool closing date?

□ Labor Day weekend
□ Weather permitting
□ Other _____

Any pool changes or additions anticipated in the upcoming year?

□ Yes □ No

I certify that the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

_____ _____ _____

Signature of Owner or Agent | Printed Name of Owner or Agent | Date