

GRAYSON COUNTY

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Sherman TX 75090-4900
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HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION
205 N Houston Ave
Denison TX 75021-3014
Tel 903-465-2878 / Fax 903-465-2978

SWIMMING POOL/SPA PERMIT APPLICATION

INSTRUCTIONS: (1) Complete all information below (2) Submit fee payable to GCHD

<p><u>ESTABLISHMENT</u></p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Tel: _____ Fax: _____</p> <p>General Manager: _____</p> <p>E-Mail: _____</p> <p>Send permit and renewal notice to: <input type="checkbox"/> Establishment <input type="checkbox"/> Owner</p> <p>Pool(s) are: <input type="checkbox"/> seasonal <input type="checkbox"/> Open all year</p>	<p><u>OWNER</u></p> <p>Name _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Tel: _____ Fax: _____</p> <p><u>APPLICANT'S NAME</u></p> <p>Signature: _____</p> <p>Print: _____ Date: _____</p>
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<p><u>POOL/SPA TRAINING CLASS</u> (Optional)</p> <p>Date: May 07, 2009 at 2:00 p.m.</p>

<u>FEES</u>		
Annual permit fee	\$300 per establishment	No limit to number of pools Municipalities are exempt from fee
Pool training class (Optional)	\$20	1 hour class trains pool operators to provide a safe environment for the public
Late penalty fee	\$50	If postmark date is after March 31 of current year

HEALTH DEPARTMENT USE ONLY		
RECEIPT NO: _____	ANNUAL FEE: <u>\$300</u>	DATE POSTED: _____
DATE PAID: _____	LATE FEE: <u>\$50</u>	DATE MAILED: _____
POSTMARK DATE: _____	TRAINING CLASS: <u>\$20 PER PERSON</u>	
INITIALS: _____	TOTAL PAID: _____	