

## Bismarck-Burleigh Public Health 500 E Front Avenue, Bismarck, ND 58504 701-355-3400 • Fax: 701-221-6883 • Email: bbph@bismarcknd.gov

FOR OFFICE USE ONLY:	
Date Recvd:	
Assigned EHS:	

## **PUBLIC & SEMI-PUBLIC SWIMMING POOL LICENSE APPLICATION**

Business Name:	Business Phone #:					
Business Address:			City:	State:	Zip:	
Mailing Address:		City:	State:	Zip:		
Owner's Name:			Owner's Phone #:			
Owner's Email:						
Applicant's Name & Title:			Applicant's Phone #:			
Applicant's Email:						
Projected Opening Date:						
Type of body of water (i.e.: swimming pool, whirlpool, splash pad, etc.)	Seasonal or Year Round	Size in Gallons	Disinfection Medium Filter type		Filter type	
The plans must be drawn to scalplans including the piping and hy  1. Plan and sectional view 2. A piping diagram showing to permit a hydraulic arm. 3. The specifications shall chemical feeders, filters. Upon receiving application mate when the plan review is complete, operate a public or semi-public semi-	ordraulic details and so with all necessal appurtenant all appurtenant all sistems of the systems of the systems of the systems, strainers, interceivals a plan review and. Pool construct the applicant must seed.	nd must include:  ry dimensions of bodies including treatem.  n all treatment equeptors and related by will be conducted ition can occur only st schedule a pre-o	oth the pool and ment facilities in ipment, includin equipment. d. Plan reviews g y after the applic perational inspe	surrounding area. sufficient detail, as well g catalog identification of enerally take 7-10 days. ant has been notified ap ction with Bismarck/Bur	as appurtenant elevation data of pumps, chlorinators, The applicant will be notified proval of the plan review. leigh Public Health. A license to	
Fees: Year Round Pool (1 bod Seasonal pool < 6 mont Each additional body of	hs (1 body of wat					
Please submit application, plans Note: <u>Do not submit payment was a subm</u>			_	•		
With my signature, I agree opera SWIMMING POOLS of Bismarck's named establishment.						
License Holder's Name (Print)						
License Holder's Signature:				Date:		