



Georgia Department of Public Health, Environmental Health Section

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APPLICATION FOR SWIMMING POOL, SPA,
AND RECREATIONAL WATER PARK MODIFICATION PERMIT

Complete in duplicate and forward the original to the **County Health Department** in which the facility is located.

1. Name of Facility: _____

2. Address of Facility: _____ Ga.
Street, Highway, or RFD City County Zip Code

3. Physical Location of Facility: _____
(GPS, LAT/LONG, or PLAT indicating physical location)

4. Facility Owner Name: _____ Phone Number: _____

5. Facility Owner Address: _____
Street, Highway, or RFD City County Zip Code State

6. Pool Type (check appropriate block):
• Swimming Pool ☐ Spa ☐ Special Purpose Pool ☐ Recreational Water Park Attraction ☐
(If special purpose, please identify the pool type below)
✓ Special Purpose Pool Type: _____

7. Specification sheets or samples provided to support the modification, repair or replacement: check block(s)
• Chemical feed pump ☐ Filter ☐ Multiport valve ☐ Tile ☐
• Chlorinator ☐ Fence ☐ Pump ☐ UV lamps ☐
• Emergency phone ☐ Handrails/ladders ☐ Plaster ☐ Vacuum cover ☐
• Flow meter ☐ Main drain cover ☐ Skimmer ☐ Other _____

8. Modification Application Date: _____ Modification Completion Date: _____

9. Description of Modification: _____

The undersigned hereby applies for a permit to operate a public swimming pool, spa, or recreational water park pursuant to the O.C.G.A. 31-45-1, et seq. and hereby certifies that he has received a copy of the Rules for Swimming Pools, Spas and Recreational Water Parks, Chapter 511-3-5, Georgia Department of Public Health.

Signed _____ (State whether Owner or Authorized Agent for the Owner) _____ Date _____