



Health Department

Division of Environmental Health
151 S University Ave, Suite 2600
Provo UT 84601 - 801-851-7525
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eh@utahcounty.gov

APPLICATION FOR PUBLIC POOLS PLAN SUBMITTAL

Name of Pool(s) _____

Address: _____ City: _____ ZIP: _____

Owner Name: _____

Address: _____ City: _____ ZIP: _____

Email Address: _____ Phone Number: (____) _____ - _____

Owner Mailing Address: (if different from above) _____

Pool Contractor _____ Engineer/Architect: _____

SEND REVIEW TO:

Name _____ Email Address: _____

REQUIRED ITEMS (showing compliance with Utah State Administrative Code of R392-302):

- 2 Sets of 11x17 plans stamped and signed by an engineer licensed in Utah
Site plan detailing dressing rooms, restrooms, showers, pool enclosure photometric, fencing, pool deck, all access points to the pool enclosure, etc
Electronic PDF via USB device
Engineering calculations, including equipment specifications
*Incomplete applications will not be accepted.
*Upon request UCHD may require larger sets of plans

Total Bodies of Water: _____ @ \$500 each

Pool _____ Spa _____ Other _____

(< 2,000 Square Feet and/or 1 feature pump)

Indoor Outdoor / Seasonal Year-Round

Total Bodies of Water: _____ @ \$900 each

Pool _____ Spa _____ Other _____

(> 2,000 Square Feet and/or 2 feature pumps)

Indoor Outdoor / Seasonal Year-Round

I hereby affirm that the above-named pool(s) will be constructed as specified in the submitted and approved plans and that construction will not begin until plans have been reviewed and approved. Any alterations of the pool(s) must be resubmitted to the Health Department for approval. I also affirm that I have been made aware of the penalties mentioned below.

A penalty may be charged for an establishment that starts operation without an annual health permit.

Name: (print) _____

Relation to Business _____

Signature: _____

Date: _____

UCHD OFFICE USE ONLY

Utah County ID #: _____
Permit #: _____

Permit Fee: \$ _____ Rec'd By: _____
Payment Date: _____
Cash Check Credit/Debit