

Submission Date: _____

Section 1: Pool/Spa Information:

Facility Name	Address/Location	Phone	
Pool Contractor	Address	Phone	Contact Name
Swimming Pool Contractor License Number (UT DOPL S380): _____			
General Contractor	Address	Phone	Contact Name
Pool Owner	Address	Phone	Contact Name

Section 2: Required Items:

Complete set of pool plans stamped and signed by an engineer or architect licensed in the State of Utah and emailed to HealthWater@slco.org

Site plan detailing location of dressing rooms, showers, mechanical room, and fencing with access points

Engineering calculations including equipment specifications

For outdoor pools and spas: a deck lighting photometrix

Section 3: Plan Review Fees:

Fee Review Schedule	List Each Pool	List Sq. Ft.	Enter Fee
< 2000 sq. ft. = \$780.00	_____	_____	_____
2001 to 5000 sq. ft. = \$1090.00	_____	_____	_____
> 5000 sq. ft. = \$1,400.00	_____	_____	_____
	_____	_____	_____
		TOTAL:	_____

It is the applicant's responsibility to notify the Salt Lake County Health Department of any plan changes. All changes must be reviewed by the consulting engineer and approved by the health department. Plan review does not constitute final approval of the completed facility. Other regulatory agencies may have additional requirements.

Applications will not be processed until payment has been received.

For payment: Call **385-468-3862** to provide credit card information (Visa/MasterCard only)
Or print and send check or money order to: Salt Lake County Health Department
Environmental Health Division
788 East Woodoak Lane (5380 South)
Murray, Utah 84107