



**SWIMMING POOL/SPA PERMIT APPLICATION**  
Department of Code Compliance Services

NAME  
DBA  
MAIL ADDRESS  
CITY, ST. ZIP

- NEW APPLICATION
- RENEWAL APPLICATION
- INFORMATION UPDATE

Application Date: \_\_\_\_\_

Permit #: \_\_\_\_\_

Fees:

First Pool / Spa \$ 175.00 x 1 = \$175.00

Each Additional \$ 100.00 x \_\_\_\_\_

<b>ALL FEES ARE NON-REFUNDABLE</b>	<b>LICENSE IS NOT TRANSFERABLE</b>
MAKE CHECK OR MONEY ORDER PAYABLE TO: <b>City of Dallas</b>	
TO PAY IN PERSON: City of Dallas Special Collections Division 1500 Marilla St. Room 2DS Dallas, TX 75201	OR MAIL PAYMENT TO: City of Dallas Special Collections Division PO Box 139076 Dallas, TX 75313-9076

Name of Property: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
(Number) (Street) (City/State) (Zip Code)

Location of Pool: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Owner Address: \_\_\_\_\_

Email Address: \_\_\_\_\_  
(Number) (Street) (City/State) (Zip Code)

Contact Person For Inspection: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Designated Manager of Pool Operations: \_\_\_\_\_

Certificate Number: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Dallas City Code Chapter 43A requires that an applicant must designate a manager of operations of each pool for which a permit is sought. If a person designated by an owner as manager of pool operations is not certified, that person shall attend and successfully complete the next training course conducted after his designation. Contact the Department of Code Compliance, (214) 671-8247 or go to [Manager of Pool Operation Class Schedule](#) for the next available certification class.

**TYPE OF FACILITY:**

Apartment  Hotel/Motel  Health Club  School Institution  Condominium  Other  \_\_\_\_\_

Signature of Owner or Agent: \_\_\_\_\_ Title: \_\_\_\_\_

Texas Driver's License or Texas Identification Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

For Code Compliance Use Only
Establishment has been inspected and meets minimum Health and Sanitation Standards for Operation.
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Inspector: _____ Date _____