



Instructions for the Public Pool and Spa Annual Operating Permit Application

FACILITY'S NAME, ADDRESS AND PHONE: Address is the street address where the pool or spa is located.

FACILITY MAILING ADDRESS: Many pools do not have a mailbox. This will be the address for all correspondence. For community pools, this is the community association or HOA address. For apartments, this is usually the property management address. The mailing address should NOT be the address of the pool management company.

POOL MANAGEMENT COMPANY: If a pool management company is responsible for the day-to-day operation of the pool, the company's information goes here. If a pool management company does not run the pool, provide the name and address of the community contact person.

DAYS AND HOURS OF OPERATION: These are normal operating hours for the pool.

HOURS WHILE SCHOOL IS IN SESSION: If the pool has reduced hours at the beginning and end of summer, enter them here.

HOURS OUTSIDE OF NORMAL OPERATING HOURS: If there is a scheduled activity such as swim team, lessons or exercise class outside the normal hours of operation, indicate the activity and schedule here.

VOLUMES: This information may be found in the pool filter room, on an engraved plastic wall chart.

WATER SUPPLY/SEWAGE DISPOSAL: Check the appropriate boxes.

TYPE OF FILTER: Indicate the type of filtration used on each individual pool and spa.

PERMIT FEES: A fee is charged for each individual pool and spa. For example, a hotel with an indoor pool and spa operating year round would pay $\$725 \times 2 = \$1,450$. The exception to this is for a wading pool operated at the same site as a main pool. There is no additional fee for the wading pool.

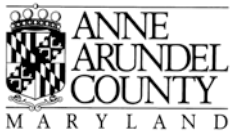
ADA AFFIDAVIT: This is a separate page. It must be filled out and submitted with the permit application every year.

MISCELLANEOUS INFORMATION: Operating permits are good for one year, and expire annually on April 30. Permits are not transferable from one owner to another. Payment may be made in cash or check, by mail or in person at the Department of Health. Make checks payable to **Controller, Anne Arundel County**. Payment must be made for seasonal pools before the annual pre-opening inspection.

Mail the completed application and payment to:

Sanitary Engineering Program
Division of Environmental Health
Anne Arundel County Department of Health
3 Harry S. Truman Parkway
Annapolis, MD 21401

For more information, call the Sanitary Engineering Program at 410-222-7217.



Public Pool and Spa Annual Operating Permit Application
 Division of Environmental Health
 Anne Arundel County Department of Health
 3 Harry S. Truman Parkway
 Annapolis, MD 21401 (410)
 222-7217

All information must be complete.

FACILITY NAME: _____

FACILITY ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE: _____

FACILITY MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

POOL MANAGEMENT COMPANY **OR** CONTACT PERSON: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE: _____

DAYS AND HOURS OF OPERATION: _____

HOURS WHILE SCHOOL IS IN SESSION: _____

HOURS OUTSIDE OF NORMAL OPERATING HOURS (Swim Team, Swim Lessons, Rentals...)

FACILITY DESCRIPTION: _____ INDOOR _____ OUTDOOR

VOLUMES: MAIN POOL: _____ gal	TYPE OF FILTER: INDICATE SAND OR CARTRIDGE
WADING POOL: _____ gal	MAIN POOL: _____ SPA: _____
SPA: _____ gal	WADING: _____ OTHER: _____

WATER SUPPLY: __PUBLIC __PRIVATE (WELL) **SEWAGE DISPOSAL:** __PUBLIC __PRIVATE (SEPTIC)

 OWNER'S/AGENT'S NAME (PRINT) OWNER'S/AGENT'S SIGNATURE DATE

PERMIT FEES: OPERATING SIX MONTHS OR MORE: \$725
 OPERATING LESS THAN SIX MONTHS: \$350

A FEE IS DUE FOR EACH POOL AND SPA, EXCEPT FOR WADING POOLS.

AMOUNT ENCLOSED: _____

DO NOT WRITE BELOW THIS LINE

**AMERICANS WITH DISABILITIES ACT (ADA)
AFFIDAVIT FOR MARYLAND PUBLIC POOLS
AND SPAS**

Anne Arundel County Department of Health
Environmental Health Bureau
3 Harry S. Truman Parkway, Annapolis, Maryland 21401
Phone: 410-222-7193 Fax: 410-222-7479
www.aahealth.org

Who should use this form?

Maryland pools and spas regulated by the Department of Health and Mental Hygiene

Why must I complete this form?

To document the pool or spa compliance status with the 2010 ADA Standards for Accessible Design

When do I need to submit this form to the local health department?

With your annual application for an operating permit

What happens if the form is not submitted?

The operating permit for the pool or spa will be denied or suspended

Maryland pools and spas regulated by the Department of Health and Mental Hygiene are required to comply with disability access laws (COMAR 10.17.01.37). The U.S. Department of Justice (USDOJ) published revised regulations for Titles II and III of the Americans with Disabilities Act of 1990 (“ADA”) in the Federal Register on September 15, 2010. These regulations adopted revised, enforceable accessibility standards called the 2010 ADA Standards for Accessible Design (“2010 Standards” or “Standards”), which are available online at http://www.ada.gov/2010ADASTandards_index.htm. The 2010 Standards set minimum requirements – both scoping and technical – for State and local government facilities, public accommodations, and commercial facilities to be readily accessible to and usable by individuals with disabilities. To determine if your facility is required to meet the 2010 ADA Standards, please see the information and guidance on the ADA website, for example, http://www.ada.gov/pools_2010.htm, contact the USDOJ for assistance at 1-800-514-0301, or consult with your attorney. For pools, wading pools, and spas built before March 15, 2012, the 2010 ADA Standards go into effect on January 31, 2013.

Provide the following information about your facility:

Name of Owner: _____

Name of Facility: _____

Mailing Address: _____

Facility Address: _____

City, Zip: _____

City, Zip: _____

Contact name: _____ Phone number(s): _____

Contact email: _____

Check one of the following regarding compliance with the 2010 ADA Standards:

- The pools and/or spas located at this facility are required to meet the 2010 ADA Standards and fully comply with these Standards.
- The pools and/or spas located at this facility are required to meet the 2010 ADA Standards but compliance is “not readily achievable” at this time (see, for example, <http://www.ada.gov/regs2010/smallbusiness/smallbusprimer2010.htm#readilyachievable>).
- The pools and/or spas located at this facility are not required to meet the 2010 ADA Standards.
- The pools and/or spas located at this facility are required to meet the 2010 ADA Standards but do not meet the Standards.

Owner’s Statement:

I have carefully examined and read this form and understand that providing false information may result in denial, suspension or revocation of an operating permit. I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing affidavit are true.

Signature

Title

Date