



City of Richardson Health Department
PUBLIC/SEMI-PUBLIC SWIMMING POOL/SPA/SPLASH PAD APPLICATION

P.O. Box 830309, Richardson, Texas 75083-0309 • (972) 744-4080

Please check one: [] New [] Renewal [] Contact/Mailing Address Change Request
(TYPE OR PRINT ALL INFORMATION)

Date: _____ Hours of Operation: _____

Name of Facility: _____

Type of Facility (please check one) [] Apartment [] Hotel/Motel [] Other

Location Address: _____ Phone: _____

Management Company: _____

Mailing Address: _____
(street no./ name/suite/building #) (city, state & zip code)

HOA Information: _____
(Contact Name) (Contact Phone Number)

Facility Manager/Contact: _____

Facility Manager/Contact email: _____

List gallons for each pool, spa, or splash pad and circle whether they are Indoor/Outdoor/Pool/Spa/SplashPad:

- 1. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad)
2. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad)
3. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad)
4. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad)
5. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad)
6. _____ gallons (Indoor/Outdoor/Pool/Spa/SplashPad) Fee

schedule: \$250.00 for each swimming pool, spa, splash pad

Total amount enclosed: \$ _____

Please make check payable to: City of Richardson

Mail notice and fee to: City of Richardson Health Department
Swimming Pool Inspection Program
P.O. Box 830309
Richardson, TX 75083-0309