



PUBLIC SWIMMING POOL / SPA PLAN REVIEW APPLICATION

Pool or Spa Business Name:	
Specific Location of Pool / Spa:	
Owner Name:	
Owner Address:	
City, State, Zip:	Owner Phone:
Builder Name:	Builder Phone:
Builder Address:	City, State, Zip:
Architect Name:	Architect Phone:
Architect Address:	City, State, Zip:
Responsible Agent:	Responsible Agent Phone:
Check one: <input type="checkbox"/> New <input type="checkbox"/> Conversion <input type="checkbox"/> Remodel	
If conversion or remodel, briefly describe changes you plan to make:	
Projected Opening Date:	

Pool / Spa Plan Review Construction Permit - \$586.00

PLEASE NOTE: The Environmental Health Pool / Spa Review is for public health purpose ONLY. Additional reviews, permits, etc., by other agencies or departments are customer's responsibility.

POOL OR SPA OPERATION WITHOUT A VALID LICENSE IS A VIOLATION OF OREGON LAW.

Signature of Applicant _____ Date _____

If you have any questions, please call 503-588-5346.

For Office Use:
PLAN REVIEW
Initials _____

\$586 per pool/spa

Receipt # _____

Date Received _____