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# ENVIRONMENTAL HEALTH CONSORTIUM

CUDAHY • SOUTH MILWAUKEE • ST FRANCIS



SOUTH MILWAUKEE HEALTH DEPARTMENT

2424 15TH AVENUE

SOUTH MILWAUKEE, WI 53172

PH (414) 768-8055 • FAX (414) 768-5720

EHCLicensing@smwi.org • www.smwi.org

## PERMIT APPLICATION PUBLIC POOL / WATER ATTRACTION

Please print or type. Submit completed application (signed and dated) and applicable fees to the address above.

Application is for: <input type="checkbox"/> New Establishment <input type="checkbox"/> Change of Operator <input type="checkbox"/> Remodel/Modification <input type="checkbox"/> Risk Change	
Establishment Name/DBA:	Establishment Telephone:
Establishment Address:	
Billing Street Address, City, State & Zip Code (if different than above):	
Primary Contact (Operator/Manager):	Primary Contact Telephone:
Primary Contact Email:	Fax:
Legal Entity (check one): <input type="checkbox"/> Sole Proprietor (Individual) <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation/LLC* <input type="checkbox"/> Nonprofit Organization <small>*If licensed as a corporation, it must be registered with the State of Wisconsin Department of Financial Institutions.</small>	
Legal Licensee:	Legal Licensee Telephone:
Licensee Street Address, City, State & Zip Code:	
Name of Corporate Contact/Agent (if applicable):	
Corporate Contact/Agent Email:	Fax:
WI Seller's Permit Number:	Name as it appears on Seller's Permit:
Operation: <input type="checkbox"/> Year-Round <input type="checkbox"/> Summer Season <input type="checkbox"/> Winter/School Season Hours: <input type="checkbox"/> Daytime <input type="checkbox"/> Evening <input type="checkbox"/> Weekend	
Name of Certified Pool Operator / Pool Management Co:	Email:
Phone:	Address:

### PLEASE CHECK THE APPROPRIATE CATEGORY

ESTABLISHMENT TYPE:	FEES	
PUBLIC POOL/WATER ATTRACTION	ANNUAL PERMIT	PRE-INSPECTION (new construction/change of operator or risk/renovation)
<input type="checkbox"/> Pool/Attraction – Simple	\$ 300.00	\$ 244.00
<input type="checkbox"/> Pool/Attraction – Simple with Features	\$ 432.00	\$ 244.00
<input type="checkbox"/> Pool/Attraction – Moderate	\$ 400.00	\$ 244.00
<input type="checkbox"/> Pool/Attraction – Moderate with Features	\$ 532.00	\$ 244.00
<input type="checkbox"/> Pool/Attraction – Complex	\$ 475.00	\$ 244.00
<input type="checkbox"/> Pool/Attraction – Complex with Features	\$ 607.00	\$ 244.00

CHECKS OR MONEY ORDERS MADE OUT TO: **CITY OF SOUTH MILWAUKEE** Total: \$

Signature of Licensee **X**

Today's Date **X**

## POOL DETAILS

### Pool or Attraction Basin Type

Select all that apply for this basin:

- |   |  |
|---|--|
| <input type="checkbox"/> Swimming pool                        | <input type="checkbox"/> Leisure River         |
| <input type="checkbox"/> Diving pool                          | <input type="checkbox"/> Vortex pool           |
| <input type="checkbox"/> Combination pool (swimming & diving) | <input type="checkbox"/> Wave pool             |
| <input type="checkbox"/> Whirlpool / Spa                      | <input type="checkbox"/> Zero-Depth Entry pool |
| <input type="checkbox"/> Wading pool                          | <input type="checkbox"/> Water/Pool Slide      |
| <input type="checkbox"/> Therapy pool                         | <input type="checkbox"/> Children's Slide      |
| <input type="checkbox"/> Cold Soak pool                       | <input type="checkbox"/> Plunge Pool           |
| <input type="checkbox"/> Exercise pool                        | <input type="checkbox"/> Drop Slide            |
| <input type="checkbox"/> Activity pool                        | <input type="checkbox"/> Run-out Slide         |
| <input type="checkbox"/> Interactive Play Station             |  |

### Features

Select all that apply for this basin:

- |  |                         |
|--|-------------------------|
| <input type="checkbox"/> Extra Deep Pool             | <b>Number Installed</b> |
| <input type="checkbox"/> Extra Large Pool            |                         |
| <input type="checkbox"/> Pool Slide                  |                         |
| <input type="checkbox"/> Waterslide                  |                         |
| <input type="checkbox"/> Vanishing Edge              |                         |
| <input type="checkbox"/> Swim-Up Bar                 |                         |
| <input type="checkbox"/> Current Generator           |                         |
| <input type="checkbox"/> Wave Generator              |                         |
| <input type="checkbox"/> Vortex Generator            |                         |
| <input type="checkbox"/> Spray Feature               |                         |
| <input type="checkbox"/> Pad Walk                    |                         |
| <input type="checkbox"/> Diving Board                |                         |
| <input type="checkbox"/> Treadmill                   |                         |
| <input type="checkbox"/> Basketball Hoop             |                         |
| <input type="checkbox"/> Volleyball Net              |                         |
| <input type="checkbox"/> Climbing Wall               |                         |
| <input type="checkbox"/> Tethered Floatable type:    |                         |
| <input type="checkbox"/> Un-Tethered Floatable type: |                         |
| <input type="checkbox"/> Other Feature type:         |                         |

Date of Construction:

Pool Location: ☐ Indoor ☐ Outdoor

Max Patron Load: Pool Area (sq ft): Pool Volume (gal): Turnover Rate (hr):

Filtration System Type:

- ☐ Sand  
☐ Diatomaceous Earth  
☐ Cartridge  
☐ Other:

Disinfectant or Sanitizer Type:

- ☐ Bromine ☐ Chlorine-  
☐ Chlorine-Erosion Calcium Hypochlorite  
☐ Chlorine-Liquid ☐ Other:  
☐ Chlorine-Gas

Recirculation System: ☐ Single basin ☐ Shared with other basin(s)

Agitation/Jet Pump: ☐ Single basin ☐ Shared ☐ None

Overflow Type: ☐ Gutters ☐ Skimmers ☐ Other:

Entrapment Prevention: ☐ Safety Vacuum Release System (SVRS) ☐ Reverse Flow ☐ Gravity Drain

## DETAILS OF OPERATION

Electronic monitoring device/controller is installed and functioning? ☐ No ☐ Yes

Flow sensing interlock(s) are installed and functioning? ☐ No ☐ Yes

Chemical feeder interlock(s) are installed and functioning? ☐ No ☐ Yes

Are drains and/or equalizers Virginia Graeme Baker Act (VGBA) compliant? ☐ No ☐ Yes

Will lifeguards be required? ☐ No ☐ Yes If "Yes", #: \_\_\_\_\_

Will instructional programs be offered? ☐ No ☐ Yes

If "Yes", is the instructional programs staffed by a lifeguard? ☐ No ☐ Yes

Will any food or beverages be offered? ☐ No ☐ Yes

Have you had a public pool license previously? ☐ No ☐ Yes How long ago? \_\_\_\_\_

Have you ever had a public pool license suspended or revoked? ☐ No ☐ Yes

If "Yes", please describe briefly:

Does the pool currently have or require a variance? ☐ No ☐ Yes

If "Yes", please describe briefly:

## CONSTRUCTION OR CHANGES

New construction or renovation plans must be approved by Wisconsin Department of Safety and Professional Services (dsps.wi.gov)

Are you planning any construction, remodeling or equipment changes? ☐ No ☐ Yes

If "Yes", check all that apply: ☐ New construction ☐ Renovation or remodeling interior  
☐ Changes to construction ☐ Equipment changes

Provide a brief description of the changes:

Name, Address & Phone Number for Architect:

Name, Address & Phone Number for Contractor: