

## TECHNICAL ENVIRONMENTAL SERVICES SUPPLEMENTAL POOL & SPA INFORMATION SHEET

[PLEASE PRINT]

Today's Date \_\_\_\_\_

### General Pool Information:

Name of Pool/Spa \_\_\_\_\_

Exact Street Address or Location \_\_\_\_\_

Number of Pools \_\_\_\_\_ Spas \_\_\_\_\_ Special Use \_\_\_\_\_

Pool Operator \_\_\_\_\_ Phone # \_\_\_\_\_

Email \_\_\_\_\_

### Pool Days and Times of Operation:

( ) Sunday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Monday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Tuesday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Wednesday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Thursday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Friday From: \_\_\_\_\_ To: \_\_\_\_\_

( ) Saturday From: \_\_\_\_\_ To: \_\_\_\_\_

**License Holder/Licensee** \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

**Owner** (If different from licensee) \_\_\_\_\_

*If a corporation or partnership, give the name of the principal officer or director or partners.*

Address \_\_\_\_\_ Phone # \_\_\_\_\_

### Contact Information:

Name \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Email \_\_\_\_\_