

NEW PUBLIC POOL/SPA NOTIFICATION FORM

This form is intended to help you meet your responsibility as the Owner of a Public Pool. Owners are required to designate a pool operator [Section 6 (1)], and to notify the Medical Officer of Health in writing, of their intention to open a public pool/spa in accordance with section 5 of Ontario Regulation 565/90. As well, at least 14 days before a public pool/spa is put into use after construction or alteration, the owner/owner's agent shall notify, in writing, the medical officer of health or public health inspector.

Building Permit Number:

Have all the preparations necessary to operate the pool/spa in accordance with the Regulation been completed? Yes No

Owner's Name:	Owner's Mailing address:	
Owner Phone Number:	Fax Number:	Owner Email Address:
Name of Pool/Spa:	Pool/Spa Address:	

Name of Pool Operator or Pool Company designated by the Owner to be the designated Operator the pool. Name (Print):

I acknowledge and agree that I am the owner of the Public Pool and have the primary responsibility to carry out the owner duties as required in Ontario Regulation 565/90 - Public Pools. (Note: if a company owns the pool, include a name of a partner/president/signing officer who will act on behalf of the owner).

Signature of Owner or partner /president/ signing officer on behalf of the Owner:		Date:
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POOL /SPA OPERATOR INFORMATION

Name of Pool/Spa Operator:		
Address:		
Operator Phone Number:	Fax Number:	Operator Email Address:

I acknowledged and agree that I am designated by the Public Pool Owner to be the Operator and have primary responsibility to carry out the Operator responsibilities as required in Ontario Regulation 565/90 - Public Pools.

Signature of Operator or partner/president/signing officer on behalf of Pool Company:	Date:
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Name of pool operator training course and date of completion:	Expiry Date of pool operators certificate:
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POOL INFORMATION

Pool is : Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/>	Pool Area >93 square metres Yes <input type="checkbox"/> No <input type="checkbox"/>	Intended Date of Pool Opening:
Class A <input type="checkbox"/> Class B: <input type="checkbox"/>	Pool Supervised Yes <input type="checkbox"/> No <input type="checkbox"/>	Maximum bather load:



Healthy and Safe Communities
Public Health Services
Healthy Environments

ph. 905-546-2189
fax. 905-546-2787
email. safewater@hamilton.ca