License Application : Public Pool or Spa

☐ Renewal ☐ New ☐ Change

Notice to all applicants: Minnesota Statutes, section 270C.72, subd. 4, requires you to supply your Minnesota business tax ID number and your social security number. Minnesota Statutes, Section 176.182 also requires information regarding workers' compensation insurance. All data submitted, except the social security number, is public data.

Where should the license certificate, renewals, and notices be sent?   ☐ Owner Address   ☐ Establishment Address

Applicant/Owner Information

Corporation Name: _____   Management Name: _____

Individual Operator: First Name _____ MI: _____ Last Name: _____

Individual Operator's Social Security #: _____   Phone#:_____

MN Business Tax ID#: _____ _____ _____ _____ _____ _____

Corporate/Management/Individual Mailing Address: **(address for receiving license, renewals, and notices)**

_____

Street/PO Box   City   State   Zip

Email Address: _____

Pool/Spa Information

Establishment Name: _____

Designated Mailing Address: _____

Street/PO Box   City   State   Zip

Certified Trained Operator Name: _____   Certification #:_____

Physical Location of the Pool: _____

Emergency Contact: _____   Emergency Phone#:_____

Workers Compensation Information

Insurance Company name: _____

Designated Address:_____

Policy #:_____   Date of Coverage:_____   Through _____

I certify that I am not required to carry workers' compensation liability coverage because:

☐ I am a sole proprietor or partner and I have no employees.

☐ I have no employees who are covered by the workers' compensation lay. Note: Only employees exempt by statute (spouse, parent, and children) are not covered by the workers' compensation law.

☐ I represent a nonprofit association which does not pay more than $1000 in salary or wages in a year.

Definitions:

Public Pool – Any pool other than a private residential pool, that is (1) open to the public generally, whether for a fee or free of charge; (2) open exclusively to members of an organization and their guests; (3) open to residents of a multiunit apartment building, apartment complex, residential real estate development, or other multifamily residential area; (4) open to patrons of a hotel or lodging or other public accommodation facility; or (5) operated by a person in a park, school, licensed child care facility, group home, motel, camp, resort, club, condominium, manufactured home park, or political subdivision with the exception of swimming pools at family day care homes licensed under section 245A.14, subdivision 11, paragraph (a).

Spa Pool – A hot water pool intended for seated recreational use with a water agitation system in addition to the recirculation system. Spa pool is synonymous with the term "whirlpool".

Late Penalty – An additional charge that is added to the license fee when a public pools is operated without first having made application and fee payment for the current years license.

Fees

Base Fee (all establishments)………………………………………………$200

☐ **Public Pool** $355 _____

☐ **Additional Pools - No. X** _____ $200 _____

☐ **Spa Pool** $200 _____

☐ **Additional Spas - No. X** _____ $110 _____

Individual Water or Sewer?   Yes ☐ $60 _____

Total Fee Calculation $ _____

For Office Use Only
Inspector Initials: _____
Check #: _____
Amount: _____
_____
Clay County/MDH

☐ **If Late Penalty Applies (1 to 30 days)**………………Add $120

☐ **If Late Penalty Applies (after 30 days)**……………Add $360

Total Fee Due If Including Late Penalty…………$ _____

Notice: An NSF check to this department will require an additional service charge of $30 per check as in Minnesota Statutes, Section 604.113, subd.2 (a). Additional civil penalties may be imposed for nonpayment.

I certify that the information provided on this application is accurate and complete; that all outlets except for unblockable drains are equipped with covers that have been stamped by the manufacturer certifying compliance with ASME/ANSI standards; and that all covers and grates, including mounting rings, have been inspected to ensure that they have been properly installed and are secure:

Signature: _____   *Date:* _____