

**WEBER-MORGAN DISTRICT HEALTH DEPARTMENT**  
477 23<sup>rd</sup> STREET, OGDEN, UTAH 84401  
TELEPHONE: (801) 399-7160  
FAX: (801) 399-7168

**POOL/SPA PLAN REVIEW APPLICATION**

Prior to our review, the required \$600.00 fee for the plan review must be paid. An accurate and detailed plan is critical for the proper construction and operation of your pool and/or spa.

DATE: \_\_\_\_\_ DATE OF PLANNED OPENING: \_\_\_\_\_

**ESTABLISHMENT NAME:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ESTABLISHMENT ADDRESS:** \_\_\_\_\_  
STREET NAME/NUMBER CITY ZIP CODE

**PARTY TO RECEIVE CORRESPONDENCE:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
STREET NAME/NUMBER CITY ZIP CODE

**CONTRACTOR:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
STREET NAME/NUMBER CITY ZIP CODE

**ENGINEER:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
STREET NAME/NUMBER CITY ZIP CODE

**OWNER:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**Owner's Representative:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
STREET NAME/NUMBER CITY ZIP CODE

**TYPE OF POOL:**    \_\_\_ OPEN YEAR AROUND    \_\_\_ SEASONAL

G OUTDOOR SWIMMING                      G INDOOR SWIMMING

G OUTDOOR HOT TUB                        G INDOOR HOT TUB

G OUTDOOR WADING                        G INDOOR WADING

G OTHER: \_\_\_\_\_ (Specify type)