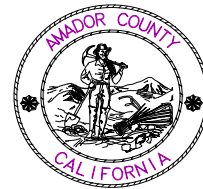


# ENVIRONMENTAL HEALTH DEPARTMENT

## LAND USE AGENCY

810 COURT STREET JACKSON, CA 95642 PHONE: (209) 223-6439 FAX: (209) 223-6228



### PUBLIC POOL /SPA PERMIT UPDATE

#### **OWNER:**

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Alt. Phone \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Nature of Business \_\_\_\_\_

#### **FACILITY:**

Name \_\_\_\_\_  
Site Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Assessor's Parcel No. \_\_\_\_\_

#### **EMERGENCY NOTIFICATION:**

	<u>Name</u>	<u>Day Phone</u>	<u>Night Phone</u>
Contact 1	_____	_____	_____
Contact 2	_____	_____	_____

#### **DESCRIPTION:**

Manager \_\_\_\_\_  
  
Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_