

507 N. Nanum Street, Suite 102 Ellensburg, WA 98926 T: 509.962.7515 F: 509.962.7581 www.co.kittitas.wa.us/health/

FOR OFFICIAL USE ONLY
Accepted By:
Permit #:
Date Processed:
Receipt #:

WATER RECREATION LICENSE APPLICATION

- 1. Complete the entire application. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.
- 2. Remit fee with completed application to the Kittitas County Public Health office.
- 3. For annual operating permits not renewed before expiration date but before one month has passed, a late fee of 20% shall be assessed. If the annual operating permit has not been renewed within one month of its expiration date, a late fee of 40% of the annual fee shall be assessed. Operations shall be suspended if the annual operating permit renewal is delinquent beyond 35 days. A 40% late fee shall be assessed along with a reopening fee if permit is renewed after suspension of operations.
- 4. Make checks payable to: Kittitas County Public Health Department (KCPHD).

 Establishment Name: Phone:

 Mailing Address:

 Physical Address:

 Owner's Name: Phone:

 Pool Operator/Person in Charge:

 Hours of Operation:

 Email:

Please write in the number of water types you have in your facility.

Seasonal Facilities*			
(Open 0-6 months of	of the permitt	ing year):	
Water Body	#	Fee	
Pools		\$450.00	
Spas		\$450.00	
Wading Pools		\$450.00	
Spray Pad/Pools		\$450.00	
Total @ \$450.00 each			

Year Round Facilities*			
(Open 6-12 months of t	he permitti	ing year):	
Water Body	#	Fee	
Pools		\$450.00	
Spas		\$450.00	
Wading Pools		\$450.00	
Spray Pad/Pools		\$450.00	
Total @ 450.00 each			

*Pre-opening fee add \$1,350 for seasonal or year-round facilities

Amount Due:	denotes intent to comply with all applicable state and local regulations. It is my understanding that the permit is non-transferable, and shall expire annually on October 31st.			
\$				
Fee is non-refundable				
Signature:	Date:			
Namo:	Title:			