BOONE COUNTY HEALTH DEPARTMENT

116 W. WASHINGTON STREET - LEBANON, IN 46052 www.boonecounty.in.gov

ENVIRONMENTAL DIVISION SUITE B201 (765) 483-4458 (765) 483-5243 FAX



Nursing & Vital Records Division Suite B202 (765) 482-3942 (765) 483-4450 Fax

ANNUAL SWIMMING POOL APPLICATION

Application will NOT be accepted unless filled out completely and payment attached

Facility Name:	•	Owner:
Facility Address:		
Phone:	Fax:	
1st pool size (gallons):		Pool dimensions:
2nd pool size (gallons):		Pool dimensions:
Hot Tub/Spa (gallons):		-
Management Company:		Contact Name:
Address:		City/State/Zip:
Phone:	Fax:	Email:
Pool Operator Service:		Contact Name:
Address:		
Phone:	Fax:	
Person in Charge (must be rec	adily available during busi	iness hours):
		Email:
*Fees are on reverse side. Plea	ase make checks payable to	"Boone County Health Department."
		refundable. The pool permit issued applies only to the
above-specified owner/facility	and cannot be used to cover	r a different owner, facility or location.
-	* *	nd representations are true and that the facility will meet Boone County, Indiana (Ordinance #2008-16, 410 IAC 6-2.1,
Signed		Date
(Owner or legally	v responsible representative)	
	_	epartment Use Only]
		: Receipt #:
Water Sample Received:	Pre-Opening Inspect	tion (date/time):

Permit Approved by: _____ Date Permit Issued: _____ Permit #: _____

EXHIBIT A

PERMIT FEES-ENVIRONMENTAL HEALTH DIVISION BOONE COUNTY HEALTH DEPARTMENT

Onsite Sewage System Permits (410 IAC 6-8.2)		
Residential		
New Installation Application Fee	\$150.00	
Permit Fee	\$100.00	
Commercial		
Application Fee (if local review)	\$150.00	
Permit Fee	\$200.00	
Septic Installer Registration Fee	\$25.00	
Well Permits		
Well and Well Pump	\$60.00	
Well Only	\$30.00	
Well Pump Only	\$30.00	
Well Driller's/Pump License-First License	\$25.00	
Each Additional Driller/Pump License	\$5.00	
Public and Semi-Public Swimming Pools Permits	45.00	
Year Round	\$150.00	
Seasonal	\$150.00	
Additional	\$100.00	
Plan Review	\$100.00	
Tan Action	4100.00	
Food Protection Program Permits		
New Plan Review	\$150.00	
Bed and Breakfast (B&B)	\$100.00	
Food Establishment		
(As defined in Title 410 IAC 7-24 as amended from time to time)		
Menu Type 1	\$175	
Menu Type 2	\$225	
Menu Type 3	\$275	
Menu Type 4	\$325	
Menu Type 5	\$400	
Temporary Food Establishment	\$70.00 per event	
Multi Event Temporary	\$210.00	
Commissary	\$100.00	
Mobile Food Establishment		
Prepackaged Foods retailed only	\$50.00	
Prepares/Serves ready to eat foods	\$140.00	
Farmer's Market	,	
Farmer's Market Food Establishment	\$70.00 one market	
Farmer's Market Food Establishment	\$140.00 multiple markets	
	,	
Tattoo, Piercing, and Body Modification		
New Plan Review	\$100	
Establishment	\$300	
Artist	\$75 per artist	
Temporary Event	\$75 per artist	
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^{*}Late fees for Tattoo, Piercing, and Body Modification Establishment, Food Establishment and B&B Permits will be \$100.00 if the permit is renewed after January 1^{st} (excluding new establishments). All other permits, the late fee will be double the amount of the permit fee.