



PLANNING & DEVELOPMENT SERVICES

### 2021 SWIMMING POOL / SPA INVOICE

Facility Name: \_\_\_\_\_

Facility Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Number of Pools (including Spas/Hot Tubs) \_\_\_\_\_

Fee: (1-2) Pools is \$200.00 \_\_\_\_\_ Each Additional Pool (3<sup>rd</sup> or more) is \$50.00/pool \_\_\_\_\_

**ALL FEES ARE NON-REFUNDABLE**

**LICENSE ARE NOT TRANSFERABLE**

MAKE PAYMENT TO: **City of New Braunfels**

**TO PAY IN PERSON:** City of New Braunfels  
Health and Food Safety  
550 Landa Street  
New Braunfels, TX 78130

**OR MAIL PAYMENT TO:** City of New Braunfels  
Health and Food Safety  
550 Landa Street  
New Braunfels, TX 78130

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Owner DL # and State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Owner Email Address: \_\_\_\_\_

**Designated Manager of Pool Operations/Contact Person for Inspection**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Type of Facility**

HOA  Hotel/Motel  Health Club  School  Apartment  Condominium  Other: \_\_\_\_\_

Signature of Owner or Agent: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY** Application Complete: Yes  No  **Permits Expire December 31<sup>st</sup> Annually**

Approved by: \_\_\_\_\_ Cash, Credit, or Check #: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Permit Number: \_\_\_\_\_ Date Paid: \_\_\_\_\_

«Name\_of\_Business»  
«Mailing\_Address»  
«City\_State\_Zipcode»

**ONE CITY, ONE TEAM**

HEALTH & FOOD SAFETY DIVISION | 830.221.4070 | 550 LANDA STREET, NEW BRAUNFELS, TX 78130 | NBTEXAS.ORG