



2023 SWIMMING POOL / SPA APPLICATION

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 (3rd or more) is \$50.00/pool _____

ALL FEES ARE NON-REFUNDABLE

LICENSE ARE NOT TRANSFERABLE

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

Preferred Method of Payment is through our New Online Portal as no mailers will be sent out in 2023.

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 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 31st Annually

Approved by: _____ Cash, Credit, or Check #: _____

Date Issued: _____ Permit Number: _____ Date Paid: _____