

**Office of Environmental Health** 101 West 9<sup>th</sup> Street, Pueblo, CO 81003 Phone 719.583.4307 Fax 719.583.9902 pueblohealth.org

## Aquatic Facility Compliance Agreement Form One request form is required for each proposed compliance agreement.

Business Information				
Aquatic Facility Name		Owner Name		
Physical address of business				
City, State, Zip Code				
Phone number		Email		
Current Certificate of Operati	ion? 🗌 Yes If yes, expira	ation date		
List the Code Citation number	r and code language for which th	he applicant is requ	uesting a complia	nce agreement.
Example: 5.7.1.1.3 Gutter/Skimmer Pools	s in the 2022 Pueblo County MAHC states, "Fo			
as".				
Describe why explicent is upo		tion of this time		
Describe why applicant is una	able to comply with the code sec	tion at this time.		
M/hat is the duration of the w		5		
what is the duration of the re	equested compliance agreement	••		

Describe how the intent of the code will be met and the reasons why the public health or safety would not be jeopardized							
for the duration of the com	pliance agreement.						
Provide a full description of	any policies, procedu	ures, or equipment that t	he applicant prop	oses to use to	rectify any		
Provide a full description of any policies, procedures, or equipment that the applicant proposes to use to rectify any potential increase in health or safety risks created by granting the compliance agreement.							
	-						
Are pictures, drawings, quo	tes, or equipment spe	ecification sheets attache	ed to this request?	□ Yes	□ No		
Owner Signature							
Date							
Health Department Use Onl	у						
Environmental Health			Date				
Specialist Review			Date				
Recommendation	Approved	Denied					
Comments							
Program Manager Review			Date				

Denied

Recommendation

Comments

□ Approved