

### **Aquatic Facility Certification of Contracted Services**

**To be completed by facility ownership; complete one per aquatic facility**

<b>Facility Information</b>			
Facility Name:			
Facility Site Address:	City:	State:	Zip:
Assessor Parcel Number (APN):			
Contact Person:			
Address:	City:	State:	Zip:
Telephone:	Email:		

<b>Design Professional Information</b>			
Architect/Engineer Name:		Company:	
Contact Person:			
Address:	City:	State:	Zip:
Telephone:	Email:		
License: <input type="checkbox"/> Architect <input type="checkbox"/> Engineer License #:		Expiration:	
Architect/Engineer Name:		Company:	
Contact Person:			
Address:	City:	State:	Zip:
Telephone:	Email:		
License: <input type="checkbox"/> Architect <input type="checkbox"/> Engineer License #:		Expiration:	

<b>Contractor Information</b>			
Pool Contractor Name:		Company:	
Contact Person:			
Telephone:	Email:		
Classification:	License #:	Expiration:	
General Contractor Name:		Company:	
Contact Person:			
Address:	City:	State:	Zip:
Telephone:	Email:		
Classification:	License #:	Expiration:	



## Environmental Health Division – Aquatic Health Program

Email: [aquatic@snhd.org](mailto:aquatic@snhd.org) | Phone: (702) 759-0572

By signing below, I hereby certify that I have contracted the services of the above listed person/company to assist in the preparation and submission of plans, applications, and calculations to the Southern Nevada Health District complete the work required by this application, and to complete the work as required by applicable law. I understand the following:

- SNHD approval of plans is required prior to the start of any construction
- Per SNHD Aquatic Facility Regulation 2-103.1, “SNHD approval is independent of all other approvals required by other regulatory entities. The applicant must separately obtain all other required approvals and permits.”
- Undisclosed design or operational characteristics on plans or applications do not constitute approval of such mistakes or omissions. Proper development and regulatory compliance of the project is responsibility of the contractor, design professional, and permit holder
- Aquatic venues are not permitted to operate until all required construction inspections, including the final permitting inspection, have been conducted and approved

Owner Name, Print: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_