



Health Department Instructions for Applying for a Bathing Establishment with Pool Permit

This permit is required to install, operate or construct any indoor or outdoor bathing establishment with a pool in New York City. This permit may also include saunas, steam rooms, or spray grounds that are at the same location as the pool(s). This permit applies to bathing establishments owned or operated by city agencies, commercial interests or private entities including, but not limited to, public or private schools, corporations, hotels, motels, camps, apartment houses, condominiums, country clubs, gymnasias and health establishments. There are two main steps to the application process:

Step 1: File the application with the Department of Consumer and Worker Protection (DCWP) Licensing Center. You may apply online or in person. See page 2 for instructions.

Step 2: File supporting documents with the Department of Health and Mental Hygiene, Office of Public Health Engineering (PHE). Submission of documents electronically by email is preferred, but hard copies may also be provided by mail. See pages 3 and 4 for instructions.

Permit application fee: \$1,980

Annual Renewal fee: \$245

Important Information – Read the Following Before You Apply for a Permit

- **Before you begin the application process, please contact PHE at PHE@health.nyc.gov or 718-786-6004 to receive guidance on how to submit your supplemental documents and plans.**
- **Please review the following:**
 - New York City Health Code Article 165 – Bathing Establishments
<https://www1.nyc.gov/assets/doh/downloads/pdf/about/healthcode/health-code-article165.pdf>
 - New York State Department of Health Information about Bathing Facilities
<https://www.health.ny.gov/environmental/outdoors/swimming/index.htm>
 - New York State Lifeguard Aquatic Certifications for Bathing Facilities
<https://www.health.ny.gov/environmental/outdoors/camps/docs/aquacert.pdf>
 - New York State Level III and Level IV Aquatic Supervision Cardiopulmonary Resuscitation (CPR) Certifications for Bathing Facilities
https://www.health.ny.gov/environmental/outdoors/camps/docs/level3_4.pdf
 - Search for New York State Licensed Engineers or Architects
<http://www.op.nysed.gov/opsearches.htm>
 - Swimming Pool Operator’s Course Information
<https://www1.nyc.gov/nycbusiness/description/swimming-pool-operation-technology-course>

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Read the following sections thoroughly before you apply.

Step 1: Apply with the DCWP Licensing Center

Apply On-Line

1. Go to <https://www1.nyc.gov/site/doh/business/permits-and-licenses/pools-spas-and-spray-grounds.page> and select the permit for which you are applying
2. Gather all supporting documentation that must be submitted along with the initial application (see the *Checklist for Required Documentation* on page 6 as well as the list of Supporting Documents on page 3).
3. Create electronic versions of your supporting documents.
4. Select Apply Online and register an account with the NYC Online Licensing system.
5. Complete the required information online, upload your supporting documents and submit payment. Payments accepted: Credit/Debit Cards only.

OR

Apply In Person

1. Obtain an application packet by either:
 - a. Calling 311 and asking for a *Bathing Establishment Permit*.
 - b. Download application forms and instructions from www.nyc.gov/healthpermits.
2. Gather all supporting documentation that must be submitted along with the initial application (see the *Checklist for Required Documentation* on page 6 as well as the list of Supporting Documents on page 3).
3. Complete the *Standard Application for New License or Permit* form (Form 314C, see page 5 for instructions), form PHE 88, form PHE 100, and form DOH 1309.
4. Contact the DCWP Licensing Center to schedule an appointment at LicensingAppointments@dcwp.nyc.gov or (212) 436-0441. Submit the Application form and supporting documents, along with payment, at the time of your appointment. The DCWP Licensing Center is located at:
DCWP Licensing Center
42 Broadway, 5th floor
Manhattan
Hours: Monday – Thursday, 8:00 a.m. – 4:00 p.m.
Payments Accepted: Money Order, Credit/Debit Cards, Checks (no cash accepted)

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Step 2: Provide Supporting documents to PHE

Supporting documents that must be included with the initial submission should be submitted to PHE by email at PHE@health.nyc.gov or emailed directly to the PHE engineering review staff. Documents #1 through #7 below are required to initiate application review:

1. Statement by Filing Engineer: Form PHE 88 (attached)
2. Application for Approval of Plans and Specifications: Form PHE 100 (attached)
3. Engineering Reports for Swimming Pool Plans: Form DOH 1309 (attached)
4. A Cover / Scope of Work letter. The letter must include a brief description of the facility background including building type and usage information, and a detailed discussion of the proposed system and the work to be performed.
5. Engineering plans of the facility, prepared, signed and stamped by a New York State licensed engineer or architect.
6. Manufacturers' specifications for pumps, flow meters, chemical feeders, etc. prepared, signed and stamped by a New York State licensed engineer or architect.
7. Hydraulic calculations, prepared by a New York State licensed engineer or architect.

Once documents #1 through #7 have been reviewed and deemed satisfactory, PHE will sign and stamp the approved plans and issue a Plan Approval Certificate signifying that the facility is approved to begin construction of their bathing establishment in accordance with the approved plans. **NOTE:** Electronic submissions of documents via email are highly preferred by PHE, but if applicants are unable to provide electronic copies, then hard copies may be submitted by mail to PHE at the following address:

*NYC Department of Health and Mental Hygiene
Public Health Engineering
Gotham Center, CN#56
42-09 28th Street
Queens, NY 11101*

For submissions of hard copies of documents, note that two copies of the engineering plan set (item #5 above) are required.

Once the construction of the bathing establishment is complete, contact PHE to schedule an inspection of the completed construction. Supporting documents #8 through #16 below must be submitted following the construction inspection but may be submitted at any time earlier during the application process as well.

8. A copy of the Sewer Discharge Permit issued by the New York City Department of Environmental Protection (NYCDEP). Pool wastewater must be disposed of through the New York City Sewer system.
9. A copy of Permission / approval letter for subsurface connection and disposal issued by the NYCDEP.
10. Proof of approval of electrical work or Certificate of Inspection for electrical work from the New York City Department of Buildings (DOB) for the pool(s) and associated pool equipment.

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Step 2: Provide Supporting documents to PHE (continued)

11. A copy of Certificate of Occupancy from the DOB showing that specific usage (for a pool or bathing establishment) on the corresponding floor is approved. A Temporary Certificate of Occupancy or Letter of Acceptance from the DOB is acceptable.
12. A Pool Safety Plan in accordance with the Department requirements that details the policies and procedures to be followed by pool personnel during normal operation and during emergencies to protect the public from accidents and injuries. The plan must include a description of daily bather supervision; injury prevention; emergency and incident response procedures, providing first aid and summoning help. The plan must be submitted and approved by PHE (see contact information below), and the approved plan must remain accessible for use at the facility all times and must be available for inspection. The plan must be reviewed and updated by the owner or pool operator for all changes and submitted to PHE for approval.
13. Obtain copies of Lifeguards' Certificates for those who will be employed to supervise bathers on the premises.
14. Proof of completion of Pool Operator's Certificate Course conducted by a New York State Department of Health approved provider.
15. Proof of Disability Insurance and Worker's Compensation Insurance for your facility or form CE-200 if you are exempt. For information on this requirement, go to <http://www.wcb.ny.gov>
16. A construction compliance certificate that includes a written statement that the establishment has been constructed in accordance with the plans and specifications approved by DOHMH. The certificate shall be prepared, signed, and stamped by a New York State licensed engineer or architect.

NOTE: If you have any questions about the documents and application requirements listed above, please contact PHE at PHE@health.nyc.gov or 718-786-6004.



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Instructions for Completing a *Standard Application for New License or Permit form (314C)*

New York City Health Code, Section 3.19 states: "No person shall make a false, untrue or misleading statement or forge the signature of another on a certificate, application, registration, report, or other document required to be prepared pursuant to this Code. No person shall make a false, untrue or misleading oral statement to the Department as to any matter investigated by the Department."

NOTE: Any form with alterations, corrections, whiteout, etc., will not be accepted.

Complete all sections of the application. If completing it by hand, please use ink and write in CAPITAL LETTERS.

1. License or Permit Name

- Enter the name of the permit or license you want to obtain. Example: Food Service Establishment

2. Section A

- Enter the individual owner's name, or all partners' names or corporation name in the box labeled "Name of Corporation, partnership or individual owner" (the permit will be issued to the corporation, partnership or person named here)
- Enter the name of the establishment in the space labeled "Trade Name/DBA"
- Provide the address where the establishment will be located. Please include in the space labeled "Premises Location" the floor, booth number, or store number where the establishment is to be located.
- Enter the establishment's telephone, fax and the email address (if any). All correspondence sent by email will be sent to this address.
- Provide your date of birth, if applying as an individual

3. Section B

- Enter the date you expect to start operating.

4. Section C

- Enter your New York State Tax Authority ID #. Not-for-Profit applicants should enter their Federal EIN. If applying as an individual, also enter your SSN. If you do not have a Social Security number, you may use an Individual Tax Identification Number (ITIN)

5. Section D

- Enter the mailing address if it is different from where the establishment is going to be located. All correspondence sent by mail will be sent to this address.

6. Section E

- Enter the name, home address, zip code, phone number, email address and title of the owner/all partners in the business/all principal officers in the corporation

7. Section F

- All applicants must complete the Workers' Compensation and Disability Insurance information requested and provide copies of proof of current insurance or form CE-200 stamped by the Worker's Compensation Board, indicating the Board received a sworn affidavit stating that such coverage is not required. An application for a permit will not be accepted without this information and proof

8. Signature

- Sign the application.
 - *Note: the person who signs the Application must be named in Section E.*
- Enter the title and telephone number of the person who signed the Application for Permit
- Indicate whether the applicant is 18 years of age or older.
 - *Note: applicants must be older than 18 years of age.*



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Checklist of Required Documentation for All New DOHMH Permit Applications (Check individual permit guidelines (see Instructions) for additional permit-specific required documentation).

Items Needed <i>Be sure the applicant's name is the same on all documents. See "Instructions for Completing an Application" for more details.</i>	Legal Business Structure		
	Individual	Partnership	Corporation or LLC
Permit Application <ul style="list-style-type: none"> All applicable sections completed Supplemental Form(s) if applicable Signed by applicant (example: owner, officer, director or shareholder) 	✓	✓	✓
Permit Fee <ul style="list-style-type: none"> See list of permit fees Credit card, money order or check payable to "DOHMH" Not-for-profits: no fee if proof of status is submitted (see below) 	✓	✓	✓
Proof of Home Address (one of the following) <ul style="list-style-type: none"> Valid driver's license or non-driver ID Current lease or mortgage statement Utility bill, bank or credit card statement dated within the last 90 days "Affidavit of Home Address" form, completed by a person living with applicant and a recent utility bill or lease in that individual's name 	✓	✓ (needed for partnership of individuals only)	
Photo Identification One government-issued ID with photo, such as: <ul style="list-style-type: none"> Driver's license or non-driver ID Alien Registration Card or Naturalization Certificate U.S. or foreign passport 	✓	✓	✓
Proof of Sales Tax Collecting Authority <ul style="list-style-type: none"> Valid original NYS Certificate of Sales Tax Authority <i>Obtain at http://www.nys-opal.com. Complete Form DTF-17 on-line or mail it to New York State Tax Department, Sales Tax Registration Unit, W A Harriman Campus, Albany, New York 12227. Takes 4-6 weeks.</i>	✓	✓	✓
Proof of Incorporation <ul style="list-style-type: none"> Certificate of Incorporation (stamped to show it was filed with the New York State Department of State) or Filing Receipt issued by the NYS Secretary of State. <i>If located outside of New York State, obtain "Certificate of Good Standing" from your Secretary of State and file with application for "Authority to Conduct Business in New York State" with NYS Department of State. You must then present this "Authority" issued by the NYS Department of State when you apply for this permit.</i>		✓ (needed for partnership of corporations or LLCs only)	✓
Workers' Compensation & Disability Insurance Coverage <ul style="list-style-type: none"> Submit proof of coverage effective when the establishment begins operation, including insurer's name, policy number, and expiration date. If such coverage is <i>NOT</i> required, submit Certificate of Attestation of Exemption (Form CE-200) from the NYS Workers' Compensation Board showing the applicant's Exemption Number and the date issued. See http://www.wcb.ny.gov. List DOHMH as the certificate holder (not the policy holder) 	✓	✓	✓
Payment of Outstanding Fines for DOHMH Violations (if any) <ul style="list-style-type: none"> <u>Certified</u> check, credit card or money order payable to "OATH Health Tribunal" (in person payment) or pay online with credit or debit card 	✓	✓	✓
Proof of Not-for-Profit Status (if applicable)* <ul style="list-style-type: none"> Letter from the IRS stating not-for-profit status* 		✓	✓
Power of Attorney or Authority to Act Affidavit (if applicable) <ul style="list-style-type: none"> If someone else will turn in the application for you 	✓	✓	✓