

Recreational Water Facility Opening/Re-Opening Notification Form

As required by section 5(3) and/or 26.1(1) of O. Reg. 565/90, I wish to notify a public health inspector of my intention to open/re-open this recreational water facility.

Facility Information

Facility/Building Name:		
Facility/Building Address:		
City:	Postal Code:	
Mailing Address of Facility (if different from above):		
City:	Postal Code:	
Type of Facility (check all that apply):		
<input type="checkbox"/> Indoor	<input type="checkbox"/> Outdoor	
<input type="checkbox"/> Class A Pool	<input type="checkbox"/> Class B Pool	<input type="checkbox"/> Spa
<input type="checkbox"/> Wading Pool	<input type="checkbox"/> Spray/Splash Pad	<input type="checkbox"/> Receiving Basin
<input type="checkbox"/> Other (please specify):		
Proposed Opening Date:		
Facility Hours:		
Reason for Opening (new facility, seasonal facility, renovation/alteration):		

Contact for Inspection

First Name:	Last Name:
Telephone & Ext.:	Fax:
Alternate number:	
E-mail:	

Owner or Operator Signature: _____ Date: _____

Please complete in full and return (fax, mail, or in person) to:

Halton Region Health Department

Healthy Environments & Communicable Disease
1151 Bronte Rd.
Oakville ON L6M 3L1
Fax: (905) 825-8797

This completed and signed form must be received at least two weeks in advance of opening. A Public Health Inspector will contact you upon receipt to discuss and to arrange for an inspection.