

**CALVERT COUNTY HEALTH DEPARTMENT
 DIVISION OF ENVIRONMENTAL HEALTH
 P.O. Box 980
 Prince Frederick, MD 20678
 410-535-3922/301-855-1557
 Fax# 410-535-5252
 www.calverthealth.org**

APPLICATION FOR PERMIT TO OPERATE A BATHING BEACH

OWNERSHIP: Municipal _____ School _____

 Commercial _____ Camp _____

 Community _____ Other _____

APPLICATION IS HEREBY MADE FOR A PERMIT TO OPERATE A BATHING BEACH FOR YEAR 2021. THE FEE TO OPERATE A BATHING BEACH IS \$140.00 YEARLY.

NAME OF BATHING BEACH: _____

LOCATION OF BEACH: _____

OWNER OF BEACH: _____

MAILING ADDRESS: _____

OWNER PHONE #: _____

EMAIL ADDRESS: _____

CONTACT PERSON: _____

CONTACT PHONE #: _____

OPERATING PERIOD: from: _____ to: _____

EXPECTED DAILY ATTENDANCE: average: _____ maximum: _____

NAME OF BODY OF WATER (river, bay, pond or lake) _____

DRINKING WATER SOURCE: _____

BATHING FACILITIES:

- | | | |
|--------------------------------------|----------------------|-------|
| <input type="checkbox"/> Bath House | Number of Houses | _____ |
| <input type="checkbox"/> Club House | Number of Toilets | _____ |
| <input type="checkbox"/> Locker Room | Number of Lavatories | _____ |
| <input type="checkbox"/> Outhouse | Number of Outhouses | _____ |

Date

Signature

HEALTH DEPARTMENT USE ONLY

APPROVED: YES NO

Approving Authority

Date