



Region of Waterloo

Health Protection & Investigation
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POOL OPENING NOTIFICATION

(Ontario Regulation 565, S.5)

Pool Name:	_____
Site Address	_____

Phone number:	_____

Owner Name:	_____
Address:	_____

Phone Number:	_____

Designated Operator Name:	_____
Home Address:	_____

Home /cell phone number:	_____

Intended Opening Date (dd/mm/yyyy):	_____
Class (circle one): A or B	
Building Permit number (applicable to construction or alteration)	_____

Please Note: A pool that has been closed more than four weeks or, undergoes construction/alteration is required to provide opening notification. Pools may not open/reopen without written permission from the Medical Officer of Health.