**Section A- General Information** *(All applicants complete entire section – please print)*

<table>
<thead>
<tr>
<th>Purpose (check one)</th>
<th>☐ New</th>
<th>☐ Information Change</th>
<th>☐ Extensive Remodel</th>
<th>☐ Change of owner/operator</th>
<th>☐ Reactivate</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Entity or Owner Responsible for Establishment</th>
<th>AK Business License #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business/Corporate Mailing Address</td>
<td>City</td>
</tr>
<tr>
<td>Business/Corporate Phone</td>
<td>Email</td>
</tr>
</tbody>
</table>

Owner(s) or Corporate Officer(s) & Title(s) or Responsible Party | Fax |

<table>
<thead>
<tr>
<th>Type of Entity</th>
<th>☐ Individual</th>
<th>☐ Partnership</th>
<th>☐ Corporation</th>
<th>☐ Other:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Establishment Name</th>
<th>Physical Location</th>
<th>Nearest Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishment Mailing Address</td>
<td>City</td>
<td>State</td>
</tr>
<tr>
<td>Establishment Phone</td>
<td>Fax</td>
<td>Contact Person</td>
</tr>
<tr>
<td>Establishment Physical Address</td>
<td>City</td>
<td>State</td>
</tr>
</tbody>
</table>

**TYPE OF OPERATION** *(Check all that apply.)*

<table>
<thead>
<tr>
<th>BODY ART</th>
<th>POOLS AND SPAS</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Body Piercing</td>
<td>☐ Limited use Pool/Spa</td>
</tr>
<tr>
<td>☐ Tattooing</td>
<td>☐ Natural/Modified Hot Springs</td>
</tr>
<tr>
<td>☐ Pool</td>
<td>☐ Spa</td>
</tr>
</tbody>
</table>

**SECTION B – NEW OR EXTENSIVELY REMODELED FACILITIES**

a. Will your facility be new or extensively remodeled? ☐ Yes ☐ No

*If you checked yes, please complete Section B and provide all required documentation.*

b. **Plot Plan.** A plot plan of the entire premises showing the location of buildings, refuse storage site, well, or other water supply, waste disposal system, and fuel storage tanks. Have you attached a copy of the Plot Plan? ☐ Yes ☐ No

c. **Floor Plan.** Have you included a detailed to scale drawing of the floor plan including:

- ☐ Layout and purpose of each room
- ☐ Location of fixed equipment and plumbing features
- ☐ Material used to finish the floors, walls, and ceilings
- ☐ Plumbing schematic showing each hot, cold, and wastewater line
- ☐ Location of restrooms, including the number of toilets and handwash sinks.

- ☐ Type and location of lighting
- ☐ Type and location of ventilation, both building and local systems
- ☐ Size, construction, and design of fixed equipment

d. **Water Supply.** Have plans been submitted to the [Drinking Water Program](#) as required by 18 AAC 80? ☐ Yes ☐ No ☐ N/A (Municipal Water Supply) **Specify:**

e. **Wastewater Disposal System.** Have plans been submitted to the [Wastewater Program](#) as specified by 18 AAC 72? ☐ Yes ☐ No ☐ N/A (Municipal System) **Specify:**

f. **Solid Waste Disposal.** Please describe how you plan to dispose of your solid waste:

---

Form 18-30-APP.01 (Rev 7/2015)
**g. Food Service.** Is food service provided?  
☐ Yes  ☐ No  
If yes, have you applied to the department for a permit as required by 18 AAC 31?  
☐ Yes  ☐ No

### SECTION C – ADDITIONAL INFORMATION

#### Body Art

a. Have you applied to the [Department of Community and Economic Development](https://example.com) for a license?  
☐ Yes  ☐ No

#### Pools and Spas

a. **Plumbing.** Have you included a labeled drawing including:  
☐ Yes  ☐ No  
- Each sewer line  
- Hot and cold potable water line  
- Circulating system  
- Each drain line  
- Filtration system  
- Each nonpotable water line  
- Piping  
- Water volume of pool/spa including: flow rate, turnover, filtration rate, anticipated maximum and average user load, hydraulic computations (including head loss), and pump curves that demonstrate how the proposed circulation pump will adequately handle pool/spa water flows.

b. **Construction Materials.** Have you included a labeled drawing including:  
☐ Yes  ☐ No  
- Construction materials  
- Dimensions and slopes  
- Decks (including slopes)

c. **Water.** Have you included the following documentation:  
☐ Yes  ☐ No  
- Method of water disinfection  
- Dimensions and slopes  
- An analysis of water supply source, including: alkalinity, pH, iron, and manganese. This must be analyzed by a laboratory certified by the Drinking Water Department under 18 AAC 80.

### SECTION D

*I declare, under penalty of unsworn falsification, that this application (including any accompanying statements) has been examined by me and to the best of my knowledge and belief is true, correct, and complete. I agree to pay all fees before operating.*

<table>
<thead>
<tr>
<th>Applicant's Signature</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Applicant's Printed Name</th>
<th>Title</th>
</tr>
</thead>
</table>