



**APPLICATION FOR A DISPLAY SPA AT TEMPORARY EVENT
PERMIT FEE - \$75.00**

Date of Application: _____

Applicant Information:

Name: First _____ Last _____ MI _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone Number: _____ Email Address: _____

Temporary Event Information:

Name of Event: _____

Street Address of Event: _____

Date(s) of Operation of Display Spa (not to exceed 21 consecutive days): _____

Anticipated Date/Time for Permitting: _____ Applicant Signature*: _____

**By signing, I acknowledge that either I or my designee will report any death, serious injury, or complaint of illness attributed to the display spa temporary event.*

PERMIT IS VALID ONLY FOR EVENT DATES AND TIMES SPECIFIED ON APPLICATION AND PERMIT. ALL PERMITS ARE VOID AFTER THE DATE AND TIME OF EVENT. ALL ITEMS ON THE ATTACHED CHECKLIST MUST BE IN COMPLIANCE PRIOR TO OBTAINING A PERMIT.

INSTRUCTIONS

Purpose: To allow applicants to apply for a permit for a portable, above ground spa that contains water but is not used for body immersion and is displayed at a temporary event. Operation permits are required in General Statutes 130A-281 and 15A NCAC 18A .2500. **A separate application must be completed for each display spa.**

Submission: **The completed application must be submitted to Buncombe County Environmental Health at least 15 days before commencing operation.** Applications can be submitted electronically at: ehrequest@buncombecounty.org or in person at 30 Valley St. Asheville, NC 28801. Payment may be submitted either in person or over the phone at (828) 250-5016.

