



Town of Wallingford, Health Department  
45 South Main St.  
Wallingford CT 06492



Vanessa Bautista RS, MPH  
Director of Health

Phone: 203-294-2065 Fax: 203-294-2064  
Email: [health@wallingfordct.gov](mailto:health@wallingfordct.gov)

**Annual Public Swimming Pool Registration\***

There is NO FEE required. This is an annual registration  
of pool operators/property managers.

Date: \_\_\_\_\_

Name of Pool: \_\_\_\_\_

Location: \_\_\_\_\_

**Pool Operator/Property Management Information:**

Name: \_\_\_\_\_

Certified Pool Operator (CPO) on Site: Yes      No

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Projected Dates of Opening: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

VGB Safety Act (see attached)

Manufacturer Name and Year Installed: \_\_\_\_\_

Please complete and return the above information to:  
Wallingford Health Department, Wallingford Town Hall  
45 South Main Street, Room #215  
Wallingford, CT 06492  
Or Fax: (203) 294-2064  
[health@wallingfordct.gov](mailto:health@wallingfordct.gov)

---

\*CT Public Health Code, 19-13-B33, defines "Public Pool" as an artificial basin constructed of concrete, steel, fiberglass or other material...which is not used at a single-family residence.

The requested information will allow us to contact the required property management or association in a timely manner in the event that a public health issue occurs. Periodic inspections will be conducted throughout the pool season to ensure a safe and healthy environment. For additional information call (203) 294-2065.

