

Butler Health Department

LICENSE APPLICATION

One Ace Road
Butler, New Jersey 07405
973-838-7200

Establishment Trade Name: _____

Establishment Address: _____

Telephone # _____ Fax# _____ E-Mail: _____

Owner/Operator: _____

Address: _____ Telephone# _____

Please mark (x) the appropriate license class which applies and submit fee.
Checks may be payable to: The Borough Of Butler.

Spa and Public Recreational Bathing Facility Classifications

- | | |
|--|-----------|
| <input type="checkbox"/> Bathing Beach | \$400.00 |
| <input type="checkbox"/> Swimming Pool | \$ 75.00 |
| <input type="checkbox"/> Hot Tub | \$ 50.00 |
| <input type="checkbox"/> Spa | \$ 100.00 |
| <input type="checkbox"/> Wading Pool | \$ 50.00 |
| <input type="checkbox"/> Non-Profit | No Fee |

This License expires on December 31st of the year in which it is issued and is not transferable. This license may be revoked by action of the Butler Borough Board of Health for failure to comply with applicable State and Local standards.

Signature Owner/Agent

Office Use Only

License # _____ Fee Paid \$ _____ Check # _____ Date _____