



APPLICATION FOR CONSTRUCTION WORK OF PUBLIC POOLS / SPAS / SPRAY GROUNDS

NOTE: Plans will NOT be accepted unless the **Application**, the plan submission **Check List** and the **Data Sheets** are **COMPLETE and LEGIBLE**, and plan check fee is PAID.

FOR OFFICIAL USE	
Fee: _____	Date: _____
Check or CCP # _____	

POOL FACILITY NAME

JOB SITE ADDRESS:

CITY: _____ ZIP: _____

FACILITY PHONE: _____

POOL OWNER NAME:

PHONE: _____

MAILING ADDRESS _____

CITY: _____

ZIP: _____

E-MAIL _____

FAX: _____

CONTRACTOR/DESIGNER:

PHONE: _____

MAILING ADDRESS _____

CITY: _____

ZIP: _____

E-MAIL _____

FAX: _____

TYPE OF POOL: Swimming Spa Wading Special Use Spray Ground Other

GENERAL CONSTRUCTION (check appropriate boxes and complete scope of work):

NEW Pool / Spa

OR Replaster Split Main Drains Deck Fence Equipment Installations

Replace Plumbing Remodel ancillary facilities Rebuild Equipment Room

SCOPE OF WORK (Briefly detail any equipment replacements.): _____

FOR OFFICE USE:

FEE: New/ Reconstruct Upgrade Replaster / Remodel Fence / Deck Replacement Equipment

OWNER/REPRESENTATIVE DECLARATION: I certify that I have read the entire application and state that all information is correct. I understand that the amount of fee paid is based on my declaration of information on this form, and that incorrect information is grounds for disapproval of the submitted plans. I also understand that plans will be discarded if not picked up within sixty (60) days of approval or disapproval, and that no inspection of my establishment will be conducted, or approval to operate granted, until all proper information requested has been received and plans have been approved and returned.

I have reviewed the CA Code and Regulations pertaining to Public Swimming Pools and Spas, and my plans follow the guide.

Signature _____

Date _____

POOL PLAN SUBMISSION CHECKLIST

Complete the appropriate section of the submission checklist below for the proposed type of project.

This checklist is required with submission, along with your application and fee. On the lines to the left, check if complete. When asked, *identify the page numbers of the plan sheets* where the appropriate issues are addressed on the plans. Mark “N/A” if items are not applicable. If the checklist below is incomplete, the plans will not be accepted by EHS.

NOTE: The “Data Sheets” referred to in the checklist are included with this application/checklist packet. Use one of the two data sheets for your type of project. Only new pools and re-construction submittals require the longer Data Sheet.

Refer to the California Pool Code for detailed code requirements:

Search “Marin EHS pools” in your browser; open the EHS site; then choose the 2015 California Pool Code, OR type:

<http://www.marincounty.org/~media/files/departments/cd/ehs/pools/poolcode2015final.pdf?la=en>

_____ Submit one set of scaled plans/drawings, including, as needed, complete recirculation system, solar system and fill system. Plans shall be submitted to a minimum scale of 1/4 inch to one foot. Include depth marker and “No Diving” tile locations, dimensions and depths of the pool, trim tile on steps, ladder and stair handrail locations. For new/reconstructed pools, submit plan AND elevation views showing depths and pool lengths for all slope breaks.

_____ Include manufacturers’ specification sheets for all new equipment; DO NOT submit catalog sheets or manuals. Equipment must be listed to the appropriate NSF/ANSI standards. Manufacturers’ make and model numbers must be marked on spec sheets that include multiple equipment and must be included on any equipment list submitted. Applies to pumps, filters, disinfection units, chemical controllers and injectors, drain covers, flow meters, etc.

OR, IF STANDARD EQUIPMENT:

_____ Submit a separate, proposed **equipment list** and identify equipment on the plans. List Manufacturer’s make and model #s, include horse power rating (HP) for pumps. For example: “Pentair / WhisperFlo Pump, #WFDS-8, 2HP”.

_____ Submit the *appropriate data sheet* that is included in the application packet, one for **EACH** pool or spa or facility. COMPLETE all data; mark with N/A if not applicable.

Page # _____ Pool plumbing: Submit plan showing and identifying suction and return lines; label diameters, and flow directions. As needed, mark existing plumbing with (e) and new plumbing with (n).

Page # _____ Deck: Plan showing deck replacement or repairs. Show deck drain system and drains, or the slope to vegetation. Specify materials and construction.

Page # _____ Equipment room: If the layout will be remodeled or newly built, include a detailed plan of the equipment room. Identify all equipment and chemical storage containers.

Page # _____ New / Reconstructions: A detailed site plan. The floor plan of the entire pool facility, building envelopes of any residential units and all ancillary areas, i.e., restrooms, showers, equipment room, filter cleaning area (for cartridge filters), chemical storage area, storage, garbage, and trash areas.

Page # _____ **INDOOR POOLS AND SPAS, AND EQUIPMENT ROOM.** Complete exhaust ventilation layout including location of ventilation registers and make up air returns. Include fan specs.

Page # _____ Room plumbing layout showing floor drains, sewer lines, cleanouts, and direction of flow to sanitary sewer. (Restrooms, Showers, Dressing Rooms).

Page # _____ Lighting details for deck areas, as well as the pool.

Page # _____ Room finish details showing floor, base cove, wall for restroom, shower and changing areas, and decks. Label the exact material on the schedule and cross-key with each material sample or specification sheet provided.

**POOL/SPA PLASTER / REMODEL / MAIN DRAIN VGB COMPLIANCE
DATA SHEET (Minor Remodeling of Existing Pools)**

Fill out one form for EACH POOL

NAME OF POOL _____

TYPE OF POOL: Main pool Spa Wading Diving Training Spray ground Other _____

SUMMARY OF PROPOSED WORK (Include all work to be done at the site.)

Replaster Split Main Drains Replace Plumbing Fence Deck
Remodel ancillary facilities (shower, restrooms, clubhouse) Rebuild Equipment Room
Equipment Installation (list) _____

GENERAL SPECIFICATIONS

Pool Dimensions (feet): _____ X _____ Capacity: _____ gallons

Shallow and deep end depths: _____ feet _____ feet Slope break 4 ½ foot depth marking line

Type of pool fill system: Auto-fill Manual fill thru permanent fill line Hose on deck

Backflow device to be installed or existing on fill line:

Atmospheric (AVB) Pressure Vacuum Breaker (PVB) Reduced Pressure Principle Device (RPP)

Other _____ Manufacturer / Model # _____

RECIRCULATION

Designed Filtration Rate (based on pool capacity): _____ gal per min.

Actual Flow Rate (from flow meter, if available): _____ gal per min.

Pump Manufacturer: _____ Model _____ H.P. _____ Existing Proposed

Jet Pump Manufacturer: _____ Model _____ H.P. _____ Existing Proposed

Existing equalizer lines are installed and operating? Yes No

Inlets and skimmers on plans Comments _____

No. of main drains installed (existing) _____ Main drain covers to be replaced? Yes No

Main drain is to be split and balanced during this project? Yes No

Existing skimmers and main drain(s) are on separate suction lines? Yes No

Anti-entrapment devices: Split drains SVRS Gravity (perimeter overflow with sump) Vent Combination

Existing Proposed Other types _____

ADDITIONAL INFORMATION (i.e., filter model if installing a pump)

Name (print) _____

Email _____

Phone _____

(This page was intentionally left blank to print back-to-back.)

DATA SHEET FOR NEW and RECONSTRUCTED POOLS & SPAS

Fill out one form for EACH POOL OR SPA

NAME OF POOL _____

TYPE OF POOL: Main pool Spa Wading Diving Training Spray ground Other _____

ANCILLARY AREA AND FACILITIES

Number of fixtures: Men's toilets _____ Urinals _____ Women's toilets _____

Number of showers: Men _____ Women _____ Sinks (total) _____

Water Source: Public Name of water system: _____ Private

Angle jet drinking fountain (location) _____

SWIMMING POOL GENERAL SPECIFICATIONS

Pool Dimensions (rectangle) _____ feet (length) X _____ feet (width) Water Surface Area _____ sq. feet

Depths / slope breaks: _____ feet _____ feet 4 1/2 foot depth marking line on plans

Pool Dimensions (circular) _____ feet (diameter) Other shapes _____

Pool Capacity _____ gallons

FILTRATION EQUIPMENT

Mfr. / Model _____ Filter Type _____ Size: _____ sq.ft.

Maximum Filtering Rate _____ GPM Turnover Time _____ hours

Wastewater discharged into: Sewer Separation tank Sump Air gap (2X diameter of discharge pipe)

RECIRCULATION

Pump Mfr. / Make _____ Model # _____ H.P. _____

Spa Jet Pump Mfr. / Make _____ Model # _____ H.P. _____

No. of skimmers _____ No. of Inlets _____ Overflow Gutter? _____

No. of bottom drains _____ Covers VGB compliant; pump and flow evaluated

Flowmeter (Make & Model #) _____

DISINFECTANT FEEDER CONTROLLER(S)

Manufacturer / Model # _____ Type _____

GENERAL CONSTRUCTION

Shell: Gunite/Plaster Fiberglass Steel Other _____ Finished color _____

Coping (type) _____ Pool Cover (type) _____

DECK Material and finish: _____ Slope: _____ inches per ft. Number of Deck drains _____

ENCLOSURE / FENCE Height: _____ Height of Gate Latch: _____ Page of plans/details for fencing: _____

Additional CONTACTS
FOR NEW and RECONSTRUCTED POOLS & SPAS
(Only one copy needed per construction site.)

POOL DESIGNER

MAILING ADDRESS

CITY:

STATE

ZIP:

POOL CONTRACTOR:

PHONE:

MAILING ADDRESS

CITY

STATE

ZIP

GENERAL CONTRACTOR:

PHONE:

MAILING ADDRESS

CITY

STATE

ZIP

OTHER SUB-CONTRACTORS:
