

Chesapeake  
Swimming Pool/SPA  
Construction Application

Plan Review Fee(\$80)Received\_\_\_\_\_

Pool Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Owner \_\_\_\_\_ Phone \_\_\_\_\_

Builder \_\_\_\_\_ Phone \_\_\_\_\_

\*Provide a set of plans that includes the following information:

1. Pool drawing with dimensions.
2. Pool piping arrangement.
3. Location of inlets, skimmers, main drain, vacuum hose connection, ladders, steps, depth markers, diving boards, and lifeline.
4. Pump room detail and diagram of filtration and chemical equipment.  
Backwash/wastewater disposal method.
5. Pool deck area including widths and slope.
6. Restroom/shower facilities when required.

Structural Specifications

Water supply:            public            approved well

Pool dimensions: \_\_\_\_\_ Shape: \_\_\_\_\_

Gallons: \_\_\_\_\_ Depth range: \_\_\_\_\_ ft.

Maximum bather load (Total Surface Area ÷ 27) : \_\_\_\_\_

Pool structure:            Poured concrete            Fiberglass            Gunite  
Other (specify) \_\_\_\_\_

Pool finish: \_\_\_\_\_ Coping: \_\_\_\_\_

Grease tile: \_\_\_\_\_ Hydrostatic Relief Valve: \_\_\_\_\_

Depth Markers: \_\_\_\_\_

[required on both coping and grease tile]

Life line: \_\_\_\_\_ Location: \_\_\_\_\_

\*"No Diving" signage required on deck surface at depths less than 5 feet.

Steps[may not project into the pool]: \_\_\_\_\_ Handrails: \_\_\_\_\_

Ladders: \_\_\_\_\_ Seats: \_\_\_\_\_

### Decking

Deck type: \_\_\_\_\_ Finish: \_\_\_\_\_

Minimum width: \_\_\_\_\_ ft.

Sloped to drain away from the pool \_\_\_\_\_

### Fencing

Fence type: \_\_\_\_\_ Height(minimum 4'): \_\_\_\_\_

Distance from ground to bottom of fence (maximum 2"): \_\_\_\_\_

Self-closing/self-latching gate: \_\_\_\_\_

Minimum distance to pool: \_\_\_\_\_

### Recirculation System

Skimmers: \_\_\_\_\_ Overflow gutters: \_\_\_\_\_

# of Outlets: \_\_\_\_\_ # of Returns: \_\_\_\_\_

[All outlets must be designed to prevent bather entrapment.]

Circulating pump: \_\_\_\_\_ size \_\_\_\_\_ rate

Turnover rate: \_\_\_\_\_

Filter type: \_\_\_\_\_ number: \_\_\_\_\_

Flow rate capacity: \_\_\_\_\_

Total filter surface area: \_\_\_\_\_

Pressure gauges: \_\_\_\_\_ influent \_\_\_\_\_ effluent \_\_\_\_\_ tank only

Backwash method: \_\_\_\_\_ sight glass: \_\_\_\_\_

Rate of flow meter: \_\_\_\_\_

Heater: \_\_\_\_\_

### Disinfection

Type: \_\_\_\_\_ Capacity: \_\_\_\_\_ Rate: \_\_\_\_\_

Other chemical feeders (specify): \_\_\_\_\_ Capacity \_\_\_\_\_

### Filter Room

Sloped to drain: \_\_\_\_\_ Floor drain: \_\_\_\_\_

Ventilation: \_\_\_\_\_

[mechanical exhaust fan/louver combination required]

Room finish: \_\_\_\_\_

NEC approved vapor proof light fixtures: \_\_\_\_\_

Electrical switches located outside of the door: \_\_\_\_\_

Pipes color coded: \_\_\_\_\_ Backwash Directions: \_\_\_\_\_

Pool Specification Placard: \_\_\_\_\_

Facilities for safe chemical storage: \_\_\_\_\_

Personal Protective Equipment: \_\_\_\_\_

[NIOSH approved respirator, face shield or goggles, chemical handling gloves and apron as a minimum, secured outside of the chemical enclosure]

NFPA 704 Placard(s) posted on door(s): \_\_\_\_\_

MSDS Sheets: \_\_\_\_\_

\*\*"Authorized Personnel Only" required on doors to rooms containing hazardous chemicals.

Other Equipment

Direct dial telephone (accessible to bathers): \_\_\_\_\_

Water fountain \_\_\_\_\_

Life Saving Equipment:

- >Ring buoy with 150lb.test line (2x pool width)\_\_\_\_\_
- >Red Cross approved backboard (with straps and neck immobilizer)\_\_\_\_\_
- >Shepherds crook \_\_\_\_\_
- >First aid kit \_\_\_\_\_

“Pool Rules” sign: \_\_\_\_\_

“Pool Capacity” sign(s): \_\_\_\_\_

“Pool Readings” sign: \_\_\_\_\_

Approved test kit: \_\_\_\_\_

Diving boards: \_\_\_\_\_

Lifeguard chairs: \_\_\_\_\_

Deck area lights: \_\_\_\_\_, \_\_\_\_\_ watts

Underwater lights: \_\_\_\_\_, \_\_\_\_\_ watts

Fill spout: \_\_\_\_\_

Vacuum cleaner: \_\_\_\_\_

Wall brush, leaf skimmer: \_\_\_\_\_

Designated eating area (at least 10' from pool): \_\_\_\_\_

Bath House Facilities

\* not required if bathers have access to these facilities within their homes no further than 500 feet away or within an adjacent clubhouse.

Showers (1 per every 40 bathers at max load): \_\_\_\_\_

Toilets (mens): \_\_\_\_\_

Toilets (womens): \_\_\_\_\_

Covered trash receptacle (womens): \_\_\_\_\_

Lavatories (mens): \_\_\_\_\_

Lavatories (womens): \_\_\_\_\_

Soap, toilet tissue, paper towel dispensers: \_\_\_\_\_

Baby changing station in each restroom: \_\_\_\_\_

Shatterproof mirrors: \_\_\_\_\_

Floor, wall, ceiling finish: \_\_\_\_\_  
(smooth, nonabsorbent, easily cleanable)

Ventilation: \_\_\_\_\_

\*Certificate of Occupancy required before a permit to operate a pool or spa can be issued by the director of public health.

Remarks: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Contractor's Signature

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_