

DARE COUNTY PUBLIC SWIMMING POOL INFORMATION

POOL APPLICATIONS

Enclosed you will find the Swimming Pool Application and Drain Safety Compliance Data sheet that must be filled out completely for each pump. Also you will find the Instructions for Completion of the Pool Drain Safety Compliance Data Sheet, Guidance for Variable Speed Pumps data sheet, and draft inspection checklist for your reference. **Incomplete applications will not be accepted.** Please complete one application for each pool/spa and return it to Dare County Environmental Health Unit prior to scheduling an inspection. The annual permit fee for each pool is \$250 and Re-inspection fee is \$25. **All fees are non-refundable.**

We accept all credit cards, checks and cash. Make checks payable to "Dare County Health Department" and send it along with a signed application(s). Payments with applications can be received at the office (this is not a mailing address):

**Dare County
Environmental Health Unit
2514 South Croatan Hwy
Nags Head, NC 27959**

Or mailed to: **Dare County
Environmental Health Unit
PO BOX 669
Manteo, NC 27954**

All inspections are required to be scheduled with the Environmental Health Specialist assigned to your pool a minimum of seven (7) days prior to your proposed opening date.

*****POOL LIGHTING*****

Before your swimming pool can be open for night swimming it will be necessary for Dare County Environmental Health to inspect the lights. This inspection is in addition to the regular pool inspection. If you would like to schedule a light inspection prior to the regular inspection please contact the office. Lighting shall be designed to illuminate all parts of the pool, the water, depth markers, signs, entrances, restrooms, safety equipment, the required deck area, and walkways.

For pools open after dusk there will be a fee of \$25 for light inspection. This fee and inspection will be required every three years or if there are any changes to the lights in and around the pool.

Public Swimming Pool Operation Permit Application

Complete one application and compliance sheet for each pool. Annual Permitting Fee: \$250

Incomplete applications will not be accepted.

Pool Information

Name of Public Swimming Pool _____

Street Address for Pool Location _____

Type of Public Pool: (Check One) Swimming Pool _____ Wading Pool _____ Spa _____ Other _____

Date of Pool Construction or Remodeled: (Check One) Before May 1, 1993 _____ May 1, 1993 or later _____

Date of Fence Construction: (Check One) Before May 1, 2010 _____ May 1, 2010 or later _____

Dates of operation:

Seasonal (April 1-October 31)

☐ Requires permitting and one (1) inspection

Year Round (January 1 – December 31)

☐ Requires permitting and two (2) inspections

Date opening pool: _____ Date closing Pool: _____

Pool Hours of Operation: _____ am/pm to _____ am/pm

For pools open after dusk must pay a \$25 light inspection fee(THIS FEE IS PAID ONCE EVERY THREE YEARS)

Owner Information

Name _____

Mailing Address _____

Contact Person _____ Phone _____

Email _____

Certified Pool Operator Information

Name of Certified Pool Operator _____

Company Name _____

Mailing Address _____

Email _____ Phone _____

Date of Certification (Include copy of certification) _____

I understand that I am required to schedule an inspection with the Dare County Environmental Health Division a minimum of seven (7) days prior to my proposed opening date and furthermore that no public swimming pool shall commence or continue operation unless the owner or operator has an operation permit issued by the Department for each public swimming pool per 15A NCAC 18A .2510(a). A re-inspection fee of \$25 shall be paid if a revisit is required in order to issue a permit. I have read this application and certify the information provided herein is true, complete, and correct.

Signature _____ Date _____

Pool Drain Safety Compliance Data
PERMIT CANNOT BE ISSUED IF FORM IS INCOMPLETE

A separate form is required for each pump including circulation, jet or feature.

Name of Pool _____ ID# _____

1. Pump Flow

Pump Manufacturer _____ Model # _____ Horsepower _____

Maximum Pump Flow at highest speed **FROM PUMP CURVE**: _____ gpm. Pump use: Circulation / jet / feature (circle one)

Has pump been serviced (disconnected from power for any reason) or changed out in last 12 months? YES / NO

Flow meter manufacturer _____ Flow meter reading _____ GPM

2. Drain Sump Measurements Is drain cover sumpless? YES/NO

Sump manufacturer and model _____ OR: Field built sump (circle if yes)

Diameter of pipe entering sump _____ inches. Pipe enters through BOTTOM /SIDE of sump (Must circle one)

Distance between highest point of outlet pipe and top edge of sump _____ inches. Sump dimensions _____

3. Drain Cover Data – MUST BE INSTALLED PER MANUFACTURER'S INSTRUCTIONS- Attach Instructions to form.

Number of main drains on each pump _____ Distance between main drains (on centers) _____ feet _____ inches

Cover/grate manufacturer _____, model _____, VGBA approval 2008 / 2017 (circle one)

Flow rating from instructions: _____ gpm Cover(s) located on pool: Floor / wall (circle one)

Date installed _____ Lifespan _____ **EXPIRATION DATE** _____

4. Equalizer Covers

Number of operable skimmer equalizers _____ Have the equalizers been permanently disabled? YES / NO

Equalizer fitting Manufacturer _____, Model _____, Lifespan _____

Bulkhead adaptor Manufacturer _____, Model _____, Date Installed _____

Diameter of equalizer pipe _____ Cover is located on (circle where mounted): Floor / wall

Equalizer fitting maximum flow rating _____ gpm.

Date equalizer cover/grates installed _____ **EXPIRATION DATE:** _____

5. Safety Vacuum Release System (SVRS) –Safety Vacuum Release System manufacturer/model# - _____

You will be required to demonstrate effectiveness during permitting inspection. Date last tested _____

6. Vacuum Line Choose One

_____ No vacuum line in pool OR _____ Protective cover on vacuum lines installed before May 1, 2010, OR

_____ Self-closing, self-latching cover designed to be opened with a tool on vacuum lines installed after May 1, 2010

Full name of person providing this information _____ Phone number: _____

Signature _____ Date _____

Instructions for Completion of the Pool Drain Safety Compliance Data Form

Please review the instructions below to ensure the Pool Drain Safety Compliance Data form is properly completed and all required information required. All components must be approved and field verified by the Health Department prior to the issuance of an operation permit in accordance with Rule .2539(c).

A FORM FOR EACH PUMPING SYSTEM MUST BE PROVIDED.

1. **PUMP FLOW** – Enter the maximum flow from the manufacturer’s pump performance curve. For variable speed pumps, enter the maximum flow at the highest speed. If a flow reduction is requested, attach required documentation. A functioning flow meter will be required to permit a pool with a flow reduction.
2. **DRAIN SUMP MEASUREMENTS** – Measurements are needed to determine the size of the cover/grate and to assure the sump is deep and wide enough to meet the requirements in the cover/grate manufacturer’s specifications.
3. **DRAIN COVER/GRATE DATA** – Enter the manufacturer, model, lifespan expiration date and maximum flow for the main drain cover(s). For VGBA 2017 covers, attach a copy of the flow rate chart.
4. **EQUALIZER COVERS** – Enter the number of operable equalizer line covers, the manufacturer, model, lifespan expiration date and maximum flow for the equalizer covers. Provide bulkhead adaptor information. If all equalizer lines are disabled or pool has no equalizer lines, please provide details on the form.
5. **SAFETY VACUUM RELEASE SYSTEM (SVRS)** – SVRS is required if dual drains are closer than 3 feet on center or pump has a single drain with a blockable cover or blockable sump. Enter the manufacturer of the safety vacuum release system (SVRS). SVRS must be tested according to manufacturer’s instructions, provide date of last test. If using other secondary method of preventing bather entrapment per Rule .2539(b), please attach documentation.
6. **VACUUM LINE** – If vacuum line ports are present in the pool, please indicate the type of cover(s) on the form.

FORM COMPLETION – A separate Pool Drain Safety Compliance Data form must be completed and submitted for each individual pool at a facility including spas, wading pools, and other pools.

The Health Department understands that the required information and/or measurements may be beyond the scope of owners or operators. In those cases, it is recommended that you contact a Registered Design Professional (Professional Engineer or Licensed Architect) or a knowledgeable pool professional to assist you in completing the form.

Guidance for variable speed pumps

Pumps should be set to achieve required turnover rate for water quality, based on the year of pool construction. Pre-1993 pools may have had a lower turnover rate and the pipes may not be able to handle an increase in water flow.

The following are acceptable ways to determine if the pool is compliant with drain safety requirements. A Drain Safety Data Sheet is still required for each pumping system.

1. Preferred method: The flow rate for the drain cover exceeds the maximum pump flow at the highest speed or rpm setting. This is for either a dual drain (each cover must exceed the maximum pump flow), or an UNBLOCKABLE drain (usually greater than 32 inches such as a channel drain), or a single drain with a secondary method to prevent bather entrapment. A drain safety data sheet must be submitted each year. This method can be found in APSP-7.
2. The flow can be calculated using pressure and vacuum readings. If done this way, the filter needs to be backwashed before the readings are taken. All valves should be in the most open position. Pictures should be taken of the readings on both gauges and kept in the file. There is a device available which combines both gauges into one for a TDH reading which can be used, and a picture of the gauge should be added to the pool file. All pools which need a flow reduction for compliance must have a working flow meter for field verification. Pictures of the gauges as well as a drain safety data sheet must be submitted each year prior to permitting. This method can be found in APSP-7.
3. Plan review: Some very large variable speed pumps will have extremely high maximum flow rates. The piping used will reduce the flow in the system. If the flow shown on a variable speed pump curve exceeds the maximum flow for the proposed drain covers, a conditional approval can be given, but this will REQUIRE compliance with one of the methods listed above prior to permitting. A drain safety data sheet will need to be completed for the file prior to permitting.
4. For any other approval which does not comply with the above options, contact your PTSI Regional Specialist.

Since variable speed pumps can be changed to increase or decrease the flow, all systems with variable speed pumps with maximum flows which could exceed the drain cover rating will be required to have a properly installed (per manufacturer's instructions) working flow meter. The pool permit should be conditioned to maintain the speed setting (rpm) determined to be in compliance with drain safety.

Field verification of the drain safety data sheet must be completed at every inspection. A reading from the flow meter must be recorded on the inspection sheet during all inspections if there is a flow reduction. If the flow meter for any system with a flow reduction or a variable speed pump which could exceed the rating for the drain covers stops working, the permit should be denied or an Intent to Suspend issued. This applies to both circulation and feature pumps.

7.19.2021

N.C. DEPARTMENT OF HEALTH & HUMAN SERVICES

Division of Public Health - Environmental Health Section

INSPECTION OF PUBLIC SWIMMING POOL

Name of Establishment: _____ Date/Time: _____

☐ Inspection

☐ Re-Inspection

☐ Visit

Water Quality (#2, #3, & #5 - .2535)

Free Chlorine: <small>(at least 1.0ppm or 2.0ppm where required)</small>	Bromine: <small>(at least 2.0)</small>	Cyanuric Acid <small>(<100)</small>	pH: <small>(7.2 - 7.8)</small>
<input type="checkbox"/> Test Kit Available			
Additional Testing:			

☐ **Water Clarity (#1 - .2535)**

Main drain grate visible from pool deck at all times.

☐ **Water Temperature:** _____ (#4 - .2535)

If heated - does not exceed 90°F (swimming pool) or 104°F (spa)

Well Water Yes No Tested Yes NO

☐ **Emergency Phone (#22 - .2530(c) .2537(b)(1))**

Dialing Instructions/Address/Call Back # Listed Near Phone - Verify Address & Phone Listed

☐ Submerged suction outlets meet ASME/ANSI A112.19.8-2007. Single drains protected (unblockable cover or SVRS & tested)

☐ **Safety Equipment: Body Hook & Ring Buoy with Throw Rope or Lifeguard with Rescue Tube (#15 - .2535, .2537)**

Body Hook: 12' Non-Telescoping w/ secure Hook Ring Buoy: Coast Guard Approved w/ 1/4 diameter rope - 1 & half the pool width or 50' (whichever is less)

POOL

☐ **Main Drains**

- 3' feet apart (#1 - .2535(2))
- Good repair & securely attached with screws (#6 - .2537(b)(7))

☐ **Depth Markings (#9 - .2532, .2537)**

- Located on Pool Deck/Pool Wall or Otherwise Visible to Swimmers
- 4" Letters - Indicated in Feet ("Feet" or "FT")
- Located no greater than 25' apart
- No Diving Markers - Areas 5' Deep or Less (6x6 International Symbol or 4" Letters)

☐ **Skimmers (#8 - .2518/.2537) 1 skimmer for each 400 square feet of water surface area of the swimming pool or fraction thereof**

- Wiers in place (.2518(k)(3)) Baskets clean (.2537) Flowing properly (.2518)

☐ **Ladders/Handrails/Steps (#11 - .2521)**

Shall be provided in deep end (either side if over 30' wide) & provided every 75 feet along the shallow area perimeter
Leading edge of handrails shall be no more than 18" horizontally from the bottom riser

- Ladders - Secure Bumpers - Provided & Flush to Wall
- Non-Slip Tread on Steps - 3-6" Clearance Between Ladder/Pool Wall

Steps - 2" Contrasting Color Band (& benches if available)

☐ **Safety Ropes with Floats (#10 - .2523)**

- Located at <5' depth slope breakpoints
- 5' max float spacing
- Contrasting Color Bands provided at shallow area breakpoint (.2537(12))

☐ **Deck**

- Clearance: Indoor Pool - 5' Outdoor Pool (<1600ft²) - 6'
- Outdoor Pool (>1600ft²) - 8' (#17 - .2522)
- Trip Hazard - 1/2" Offset (#17 - .2537(b)(2))
- Over-The-Rim Spout: Located Under Diving Board or within 6' of handrail (#30 - .2512(c))
- 5' clearance around diving board, handrail, slide or other permanent structures (.2522(e))

☐ **Required Signs (.2526/.2530)**

- WARNING-NO LIFEGUARD ON DUTY (letters at least 4") (#18 - .2530(c) .2537(b)(1))
- CHILDREN SHOULD NOT USE THE SWIMMING POOL WITHOUT ADULT SUPERVISION (letters at least 1") (#18 - .2530(c) .2537(b)(1))
- ADULTS SHOULD NOT SWIM ALONE (letters at least 1") (#18 - .2530(c) .2537(b)(1))
- Location of Emergency Phone if not clearly visible (.2530(f) .2537(b)(1))
- Sign prohibiting pets and glass containers (#19 - .2530(d) .2537(b)(1))
- Pool Closed sign (to use whenever Pool is closed)
- Sign directing pool users to shower before entering Pool (#28 - .2526(a))

WADING POOL (.2531)

☐ Wading pools shall be no deeper than 24" at the deepest point.

☐ **Skimmer (#8 - .2518/.2537) Minimum 2 skimmers**

- Wiers in place (.2518(k)(3)) Baskets clean (.2537) Flowing properly (.2518)

☐ **Deck**

- Clearance: Wading Pool - 4' (#17 - .2522)

☐ **Required Signs (.2526/.2530)**

- WARNING-NO LIFEGUARD ON DUTY (letters at least 4") (#18 - .2530(c))
- WARNING-To prevent serious injury do not allow children in wading pool if drain cover is broken or missing (if only has one drain) (.2539(a))
- Location of Emergency Phone if not clearly visible (.2530(f))
- Sign prohibiting pets and glass containers (#19 - .2530(d))
- Pool Closed sign (to use whenever Pool is closed)
- Sign directing pool users to shower before entering Pool (#28 - .2526(a))

SPA (.2532)

- ☐ **15 Minute Timer**
 - Placed such that a bather must leave the spa to reach the switch
- ☐ **Skimmer** (#8 - .2518/.2537) 1 skimmer per 400 square feet or fraction thereof of surface area.
 - Wiers in place (.2518(k)(3))
 - Baskets clean (.2537)
 - Flowing properly (.2518)
- ☐ **Ladders/Handrails/Steps/Benches** (#11 - .2521)
 - Steps, step-seats, ladders or recessed treads shall be provided where spa and hot tub depths are greater than 24 inches
 - Contrasting color bands or lines shall be used to indicate the leading edge of step treads, seats, and benches (.2537(b)(12))
 - A spa/hot tub shall be equipped with at least 1 handrail (or ladder) for each 50 ft of perimeter, or portion thereof, to designate points of entry and exit
 - Maximum depth of any seat or sitting bench shall be 2 ft measured from the waterline
- ☐ **Deck**
 - Clearance: Spa - 4' (halfway around spa) (#17 - .2522)

☐ **Required Signs** (.2532/.2526/.2530/.2537)

- **CAUTION:** (exact wording, letters at least 1/2") (#18 - .2532(15))
 - Pregnant women; elderly persons, and persons suffering from heart disease, diabetes, or high or low blood pressure should not enter the spa/hot tub without prior medical consultation and permission from their doctor;
 - Do not use the spa/hot tub while under the influence of alcohol, tranquilizers, or other drugs that cause drowsiness or that raise or lower blood pressure;
 - Do not use alone;
 - Unsupervised use by children is prohibited;
 - Enter and exit slowly;
 - Observe reasonable time limits (that is, 10-15 minutes), then leave the water and cool down before returning for another brief stay;
 - Long exposure may result in nausea, dizziness, or fainting;
 - Keep all breakable objects out of the area
- Location of Emergency Phone if not clearly visible (.2530(f))
- Pool Closed sign (to use when closed)
- Sign directing pool users to shower before entering & prohibiting oils, body lotion, and minerals (#20 - .2532(17))

FENCE/GATE (#16-.2528 .2531(a)(7) .2537(b)(5))

- ☐ **Fence: 48" Height**
 - No handholds/footholds
 - 45" between rungs horizontal members
 - Constructed prior to 5/1/2010, at least 30" between rungs
 - 4" gap max between vertical members
 - 2" gap at bottom
- ☐ **Gates: 48" Height**
 - 54" Latch Height or
 - 3" on inside of Gate (Pool Side) with 18" barrier for openings > 0.5", or key fob access
 - 2" gap at bottom
 - All entrances (doors from occupied building) must be self-latching & self-closing

BATHROOM/SHOWERS (#28-33-.2526)

- ☐ **Hot Water Temperature** 110°F (max), if provided
- ☐ **Toilet Paper Provided**
- ☐ **Soap Dispenser & Soap Provided**
- ☐ **Mirrors Shatterproof**
- ☐ **Showers** - Fixtures clean, working properly

PAPERWORK/CERTIFICATIONS

- ☐ **Daily Records Maintained** (.2535(10, 11, 13))
 - Testing 2x per day, 6 hrs apart (once by CPO)
 - Recommendation: Hyperchlorinate every 2 weeks (monthly at least) according to CDC Guidelines & document in records
 - Cyanuric Acid once a week
- ☐ **CPO Certifications** (.2537(c) CPO Training
 - National Swimming Pool Foundation or American Swimming Pool & Spa Association

PUMP ROOM

- ☐ **Locked** when not in use (#25 - .2533)
- ☐ **Lighting** to read all gauges (#25-.2533)
- ☐ **Ventilation** - cross draft or continuous forced (#25-.2533)
- ☐ **Hose Bib w/ Backflow prevention** within 50' (#25-.2533)
- ☐ **Flowmeter on Filtered Return Line to Pool** (#24-.2518(g))
- ☐ **Spare Strainer Basket** (#24-.2518(e))
- ☐ **Pump**-3 horsepower or smaller, shall be NSF listed (#24-.2518(e))
- ☐ **Valves & Pipes Labeled Properly** (#26-.2518(d))
- ☐ **Air Gap at Filter Backwash Pit** (#27-.2513(b))
- ☐ **Chlorine Feeder NSF Approved** (.2535(6))
 - Liquid Chlorine: Test feeders shall automatically shut off when the circulation pump is not operational
Shut off power to pool (recirculating) pump
- ☐ **Single Main Drain/Drains Closer than 3' - Require 2ndary method to prevent bath entrapment**
 - Test Safety Vacuum Release System works properly
 - Close skimmer valve
 - Then close main drain valve
 - VacAlert or Stingl Switch should trip on

CHEMICAL ROOM - Should be Separate from Pump Room

- ☐ **Lighting** provided (#25-.2534)
- ☐ **Ventilation** - cross draft or continuous forced (#25-.2534)
- ☐ **Pool Chemical Storage ONLY** (#25-.2534)
- ☐ **Chemicals stored properly & off the floor** (#25-.2534)

OTHER

- ☐ **NIGHT SWIMMING**
 - No Night Swimming - Condition stated on permit, unless approved based on night lighting check/inspection
- ☐ **Operational Hours Posted**