



Public Pool and Spa Program

Biology Section
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POOL Application

Pursuant to RSA 485-A:26, any person requesting public bathing facility construction approval shall submit the following information and a \$100 fee for each facility. **NOTE: No installation or reconstruction may be initiated until DES approval has been granted. No changes to any structure and/or circulation and disinfection system component may be made without prior approval from DES. A pre-opening inspection by DES is required prior to public use. If any requirement in Env-Wq 1100 conflicts with a local ordinance, the more stringent requirement shall apply. Applications will be denied without the required documents***

Name of establishment where facility is located:	Location of facility (Town / City):		
Establishment physical street address:	Facility Type:		
	Swimming Pool <input type="checkbox"/>	Wading Pool <input type="checkbox"/>	Spray Pad <input type="checkbox"/>
	Receiving Pool <input type="checkbox"/>	Therapy Pool <input type="checkbox"/>	Other <input type="checkbox"/>
	If other, please describe:		
Establishment phone number:	Facility is located: Outdoors <input type="checkbox"/> or Indoors <input type="checkbox"/>		
Owner/Contact: Mailing address: Owner Phone number:	General Contractor: GC Contact name/phone: Mailing Address: GC Contact phone number:		
Facility Designer / Installer: Contact: Mailing address: Phone number:			

*ATTACH DOCUMENTS SHOWING THE FOLLOWING INFORMATION:

1. Simple layout of buildings, pool, rest rooms, showers, location of backflow prevention and water supply.
2. Scale drawing of pool showing; dimensions, slides, ladders, stairs, benches, lights, and shut-off switches.
3. Longitudinal section of entire pool and cross-section at deep end showing depths & slopes.
4. Detailed schematic of circulation, filtration and disinfection system piping including; size, location and material of piping, skimmers, inlets, spacing of gutter or deck drains; fill-spout and main drains / suction outlets.
5. Specifications of pump (include curves), filtration, disinfection (including automated controllers), heater and anti-entrapment system components.

INFORMATION FOR POOL STRUCTURE:

Calculated capacity in gallons: (account for benches, stairs, etc.)		Material of construction Gunitite: <input type="checkbox"/> Fiberglass: <input type="checkbox"/> Concrete: <input type="checkbox"/> Vinyl: <input type="checkbox"/> Other: <input type="checkbox"/>	
Pool Shape and Dimensions:			
Shallow end depth (ft):		Perimeter of pool(ft):	
Max deep end depth (ft):		Surface area of pool (sq ft):	
Depth at breakpoint (ft):		Indicate distances (ft) between slide(s): _____ and side walls: _____	
Slope of bottom at shallow end (ft/ft) shall not exceed 1 foot vertical foot in 12 feet horizontal.			
Public pools to be used for competitive swimming or diving shall refer to the standards of USA Swimming, Inc or USA Diving, Inc or other sanctioning body.			

INFORMATION FOR POOL CIRCULATION SYSTEM:

Number of inlets:	Floor <input type="checkbox"/>	Wall <input type="checkbox"/>	<u>Submerged Suction Outlet Details</u>	
Gutter overflow system:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Multiple suction outlets must be hydraulically balanced.	
Number of skimmers:			All multiple drains must be separated by min. 3 feet or two separate planes.	
Skimmer equalizer lines:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	A minimum of 2 submerged suction outlets must be provided for each pump.	
Hair strainer (Skimmer):	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Drain covers <u>must be</u> ASME/ANSI A112.19.8-2007 compliant.	
Dedicated vacuum line:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Equalizer and dedicated vacuum lines must have approved outlet fittings.	
Flow meter Mfg.:			Number of submerged suction outlets:	
Flow meter range:			Flat grate dimensions: _____	
Vacuum and PSI gauges at pump: Yes <input type="checkbox"/> No <input type="checkbox"/>			Flat grate gpm rating: _____ Velocity not to exceed 1.5 (fps)	
			Suction outlet cover/grate Mfg:	
			Suction outlet cover/grate model:	
Surge or Balance tank: Yes <input type="checkbox"/> No <input type="checkbox"/> Please specify:				
Filter Type:	High Rate Sand: <input type="checkbox"/>	Filter Mfg:		
	Cartridge: <input type="checkbox"/>	Model/Quantity:		
	Diatomaceous Earth: <input type="checkbox"/>	Filter area (sq ft):	Filter media flow rate (gpm/filter area) =	
<u>Number and Type</u> of pump(s)(filter, booster, feature, etc):				
Pump(s) maximum recirculation rate (gpm):				
How many outlets does each pump serve?				
Turnover time (hours): Pool gallons/gpm/60 min per hour =				
Disinfection Type: Chlorination: <input type="checkbox"/>		Disinfection Method		Disinfection unit Mfg.:
Bromination: <input type="checkbox"/>		Positive displacement: <input type="checkbox"/>		Model: Capacity(units):
Saline System: <input type="checkbox"/>		Erosion: <input type="checkbox"/>		Automated Controller? Yes <input type="checkbox"/> No <input type="checkbox"/>
<u>Supplemental</u> : UV or Ozone: <input type="checkbox"/>		Generator: <input type="checkbox"/>		Mfg.: Model:

INFORMATION FOR POOL SAFETY AND MANAGEMENT:

Twelve foot pole with body hook: Yes <input type="checkbox"/> No <input type="checkbox"/>	<u>Entrapment avoidance methods</u>	
Rope with floats at break point : Yes <input type="checkbox"/> No <input type="checkbox"/>	SVRS devices <u>must be</u> ASME/ANSI A112.19.17 compliant	
Depth markers: deck and vertical wall: Yes <input type="checkbox"/> No <input type="checkbox"/>	SVRS devices must be installed per manufacture instructions	
Rescue Flotation: Yes <input type="checkbox"/> No <input type="checkbox"/>	Type: SVRS: <input type="checkbox"/>	
Security fencing provided: Yes <input type="checkbox"/> No <input type="checkbox"/>	Gravity Collection Tank: <input type="checkbox"/>	
Self-closing and Self-latching gate: Yes <input type="checkbox"/> No <input type="checkbox"/>	Other (specify): <input type="checkbox"/> _____	
# Toilets available for immediate use: _____	SVRS Mfg:	
# Showers available for immediate use: _____	Model:	
Fencing, self-latching and self-closing gates installed in accordance with Env-Wq 1105.07 Yes <input type="checkbox"/> No <input type="checkbox"/>		
Pool Area Signs Included		
“No Lifeguard” at all points of access: Yes <input type="checkbox"/> No <input type="checkbox"/>	Phone or nearest location: Yes <input type="checkbox"/> No <input type="checkbox"/>	Max Bather Load
Patron Rules (Env-Wq 1104.03): Yes <input type="checkbox"/> No <input type="checkbox"/>	“No Diving” sign: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Circulation/Disinfection system operating instructions provided for pool owner/operator: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Water quality test kit (DPD), with fresh dated reagents is <u>provided</u> and capable of testing for:		
Free, total and combined chlorine or bromine, pH, temperature, alkalinity, etc. Yes <input type="checkbox"/> No <input type="checkbox"/>		

INFORMATION FOR WATER SUPPLY AND BACKWASH DISPOSAL:

Source of facility make-up water: Municipal: <input type="checkbox"/> Well: <input type="checkbox"/> Surface Water: <input type="checkbox"/> Source water analyzed? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Make-up water piping is:	Hard piped with a six inch air gap: <input type="checkbox"/>
	Hose filled with a vacuum breaker backflow preventer: <input type="checkbox"/>
If filter is to be backwashed, where is disposal site for backwash? Municipal sewer: <input type="checkbox"/> Dry well: <input type="checkbox"/> NA: <input type="checkbox"/>	
On the ground infiltration: <input type="checkbox"/> (backwash shall not be discharge directly overland to wetland, stream or water body)	