



Public Pool and Spa Program

Biology Section
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SPA 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***

RESIDENTIAL SELF CONTAINED SPAS ARE NOT PERMISSABLE UNLESS THEY ARE RECONFIGURED TO COMPLY WITH ALL OF THE APPLICABLE REQUIREMENTS OF ENV-WQ 1100

Name of establishment where facility is located:	Location of facility (Town / City):
Establishment physical street address:	Facility is located: Outdoors <input type="checkbox"/> or Indoors <input type="checkbox"/>
Establishment phone number:	
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, spa, rest rooms, showers, location of backflow prevention and water supply.
2. Scale drawing of spa showing; dimensions, hand rails, ladders, stairs, benches, lights, and shut-off switches.
3. Longitudinal section of entire spa 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 SPA STRUCTURE:

Calculated capacity in gallons: (account for benches, stairs, etc.)		Material of construction: Gunite: <input type="checkbox"/> Fiberglass: <input type="checkbox"/> Concrete: <input type="checkbox"/> Other: <input type="checkbox"/>	
Maximum water depth (ft):		Shape of Spa	
Depth of seat or bench (ft):		Dimensions (ft)	
Perimeter(ft):		Diameter, L X W, etc.	
Surface area(sq ft):		Circular: <input type="checkbox"/>	
Slope of bottom (ft/ft):		Square or Rectangular: <input type="checkbox"/>	
		Octagonal: <input type="checkbox"/>	
		Roman: <input type="checkbox"/>	
		Other(specify): <input type="checkbox"/>	

INFORMATION FOR SPA CIRCULATION SYSTEM:

Number of inlets:	Floor <input type="checkbox"/>	Wall <input type="checkbox"/>	<u>Submerged Suction Outlet Details</u> Multiple suction outlets must be hydraulically balanced. Multiple drains must be separated by min. 3 feet or two separate planes. A minimum of 2 submerged suction outlets must be provided for each pump. Drain covers <u>must be</u> ASME/ANSI A112.19.8-2007 compliant. Equalizer and dedicated vacuum lines must have approved outlet fittings.
Gutter overflow system:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Number of skimmers:	_____		
Skimmer equalizer lines:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Hair strainer (Skimmer):	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Dedicated vacuum line:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Number of submerged suction outlets:
Flow meter Mfg:			Flat grate dimensions: _____
Flow meter range:			Flat grate gpm rating: _____ Velocity not to exceed 1.5 (fps)
Vacuum and PSI gauges at pump: Yes <input type="checkbox"/> No <input type="checkbox"/>			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):			
Maximum recirculation rate (gpm) for each pump:			
Number of outlets that each pump serves (including skimmers):			
Turnover time (hours): Spa 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"/>	
<i>Supplemental:</i> UV or Ozone: <input type="checkbox"/>	Generator: <input type="checkbox"/>	Mfg.:	Model:

INFORMATION FOR SPA SAFETY AND MANAGEMENT:

Spas must include an emergency shut off switch that will shut off <u>all</u> pumps serving the spa		<u>Entrapment avoidance methods</u> SVRS devices <u>must be</u> ASME/ANSI A112.19.17 compliant SVRS devices must be installed per manufacture instructions	
Depth markers: deck and vertical wall: 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"/>			
Spa 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 spa owner/operator:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Water quality test kit (DPD), with fresh dated reagents <u>is 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)	