

ENVIRONMENTAL HEALTH OFFICES

GWINNETT

Lawrenceville, GA 30046

5 770.963.5132

866.265.4293

NEWTON

455 Grayson Highway, Suite 600 1113 Usher Street, Suite 303 1329 Portman Drive, Suite F Covington, GA 30014 **5770.784.2121 770.784.2129**

Conyers, GA 30094 770.278.7340

866.551.0133

ROCKDALE

SWIMMING POOL APPLICATION

Application Date:	_		
Swimming Pool Type	☐ Seasonal	Year-round	☐ Food will be served at this location
	FACILITY I	NFORMATION	
Facility Name			
Address			
City	State		Zip
Phone () Fax ()	Property Tax ID	(District-Land Lot-Parcel)
	POOL SIZE -	- CHOOSE ONE	
☐ LESS THAN 500 SQ. FT. WITH FEA	TURES	☐ MORE THAN OF	R EQUAL TO 500 SQ. FT. WITH FEATURES
☐ LESS THAN 500 SQ. FT. WITHOUT	FEATURES	☐ MORE THAN OF	R EQUAL TO 500 SQ. FT. WITHOUT FEATURES
(features include but are not limited to	water slides, mushroor	ns / water trees, wate	r sprays, water cannons/toys, therapy jets)
POOL VOLUI	ME =		gallons
	OWNER INFO	RMATION	
Must be either a valid corporation which is registered with the Georgia Secretary of State's office or owner's personal name. This information cannot be changed once the facility is permitted. If changed after permitting, it will be considered a change of ownership and all plan review and permitting fees will apply.			
CORPORATION NAME OR LLC (If Applicable			
OWNER'S PERSONAL NAME			
Type of Government Issued Identification (ID)			ID Expiration Date
Address			
City	State_		Zip
Phone () Work ()	FAX	. ()	Other ()
E-mail			
	BILLING IN	IFORMATION	
Please note this is the address where all bills and permits will be mailed.			
Facility Name		Attention	
Address			
City			Zip
Phone () Work ()	FAX	()	Other ()
E-mail			



PR1

PR2 PR3

GWINNETT, NEWTON AND ROCKDALE HEALTHY. PROTECTED. PREPARED.

APPLICANT/AUTHORIZED AGENT INFORMATION Any change to the owner's name constitutes a change in ownership. Any change in owner/ownership will require a new, application, plan review, and permitting fee. Permits are not transferable from owner to owner or location to location. Continued operation without a valid permit is a violation of the GNR Public Health's Rules and Regulations Governing Public Swimming Pools, Spas, and Recreational Water Parks and may result in legal action. , affirm that all the information provided in this application (including the (Legal Name of Applicant) Verification of Residency and all supporting documents) is true to the best of my knowledge. I understand that any misrepresentation, omission, or concealment of material facts is grounds for denial or revocation of my Swimming Pool/Spa Permit. I have read and agree to abide by GNR Public Health Rules and Regulation Governing Public Swimming Pools, Spas, and Recreational Water Parks. Applicant Signature ____ Date ____ Applicant's Phone Number Applicant's affiliation with facility (check one): ☐ Owner ☐ Contractor ☐ Architect ☐ Expeditor ☐ Other _____ NOTE: A pool transferred from builder/developer to HOA will constitute a change of ownership. Inspector Area _____ Existing Permit # _____ Office Use Only: COO NEW

PR5

PR4

Desk Duty Initials _____



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NEW POOL CONSTRUCTION APPLICATION REQUIREMENTS

1.	A completed application.
2.	A completed and notarized residency affidavit.
3.	Scaled drawing stamped by a Professional Engineer of Georgia, Registered
	Engineer of Georgia, or Registered Architect of Georgia.
4.	Manufacturer specification sheet for circulation pump including performance
	curve.
5.	Manufacturer specification sheet for any water feature pump including
	performance curve if applicable.
6.	Manufacturer specification sheet for filter.
7.	Manufacturer specification sheet for chlorinator.
8.	A completed Gwinnett County Environmental Health Hydraulics Worksheet.
9.	Ownership valid as per Georgia Secretary of State website.



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SWIMMING POOL PLAN REVIEW CHECKLIST

Po	ool Name:	
/	Address:	
Со	ontractor:	
	Phone:	
Nu	umber of Pools Applied for:	
the Dep pipi	view and complete this document in its entirety. This document must be turned in before Environmental Health Department. If piping/sump inspections are not scheduled with the partment prior to pouring concrete, an engineer will be required to provide signed ing/sumps were installed as per plans. Otherwise, the concrete may have to be removed inspect appropriately.	e local Environmental Health ed documentation that the
l, _	, affirm that all information prov (Legal Name of Applicant)	vided on this form has been
	riewed and completed. I also agree with the above statement regarding the scheduling y omission may result in a delay in the approval of the pool plans.	of piping/sump inspections.
App	plicant Signature Date	
GE	ENERAL INFORMATION	
	Plan review paid	
	Pool piping plan stamped by Design Professional. A Design Profe Registered Architect of Georgia, a Registered Landscape Archite Engineer of Georgia, or a Registered Engineer of Georgia.	
	GNR Public Health Environmental Health Swimming Pool Hydrau Worksheet completed for each pool. (https://www.gnrhealth.com/services/environmental-health-index/regulationsforms/)	•
Wa	aste disposal method	
	Sanitary Sewer Septic: Permit Number	





POOL CONSTRUCTION

Pool will be constructed of inert, enduring, smooth and easily cleanable material and completely light colored. Vinyl liner prohibited. Any pool interior surface which has any aggregate which is not light colored is prohibited. Only white plaster can be approved without additional information sample. Once a pool interior surface sample is approved, any change of material must be approved by the county's Environmental Health office where the pool is located.
Pool will be connected to the public water supply.
Plan has overhead and sectional view.
Plan shows all piping including connection between piping at pools and piping in the pump room.
Plan shows deck sloping minimum of $\frac{1}{4}$ per foot away from pool to either deck and/or landscape drains.
Pool interior corners will be coved.
Lifeline will be installed at break.
Slope for depths less than five (5) feet will be less than 1:12; depths greater than five (5) maximum slope will be 1:3. Slopes for zero-depth entry and wading pools will be a maximum of 1:12.
Slip-resistant tile depth markings "FT" or "FEET" will be provided on the deck at shallow, break and deep ends. Tile depth markings will be provided on the water line at the shallow, break and deep ends.
One egress will be provided for every seventy-five (75) feet of perimeter. A ladder or recessed steps provided at the deep portion of the pool. When a pool width at the deep portion is greater than thirty (30) feet, ladders will be provided on both sides of the pool at the deep portion.
Steps will be slip-resistant and have a maximum riser of twelve (12) inches and a minimum tread width of twelve (12) inches.
Ladder treads will be at least fourteen (14) inches wide and at least five (5) inches deep. Treads will have a vertical spacing which does not exceed twelve (12) inches and minimum distance of seven (7) inches.



	The deck must be at least four (4) feet wide. All decking, including coping, feet of the pool edge will be constructed of slip-resistant approvable material. Broom swept concrete is approvable without further information. However, any other flooring material will necessitate a sample or a manufacturer's specification sheet showing the flooring material has a slip coefficient of at least 0.6 when wet or a dynamic coefficient of friction of at least .42 when wet .
DI	VING AREAS Number of boards provided
	When diving equipment is installed, it shall conform to the specifications set forth in Section 5, subsection 6 <i>Minimum Dimensions for Diving Portion of Pool of the 2018 GNR Public Health Rules and Regulations Governing Swimming Pools, Spas, and Recreational Water Parks (refer to pages 20-22).</i>
	Board will be made of non-slip, easily cleanable, corrosion resistant material.
LI	<u>GHTING</u>
	Artificial lighting shall be provided for all indoor and outdoor pools and spas.
	Lighting shall be adequate to illuminate the entire swimming pool enclosure without glare.
	When pool is being operated after dark, there must be enough lighting to see the deck and main drain covers in the pool(s).
	All installations, including dressing rooms, sanitary facilities, equipment rooms and concessions, shall comply with local building code requirements.
SA	AFETY
	Minimum four foot high fence or barrier will be provided around entire pool area with a maximum of four (4) inches clearance between bottom of barrier and ground surface. Adequate first aid kit will be provided.
	One ring buoy will be provided with an outside diameter of approximately 15 inches, or similar flotation device which is U.S. Coast Guard approved, with throwing rope attached.



	Throwing rope of a length equal to the one and one-half times the maximum width of the pool or fifty feet in length, whichever is less, firmly attached to ring buoy.
	Shepherd's crook will be provided which is a minimum of twelve (12) feet.
	Where no lifeguard is on duty, a sign will be placed in clear view at or new the entrance of the pool stating in clearly legible letters no less than four (4) inches height "No Attendant/No Lifeguard on Duty".
	Approvable pool rules sign will be provided (refer to pages 60 of the GNR Public Health Rules and Regulations Governing Public Swimming Pools, Spas, and Recreation Water Parks).
FIL	TRATION PUMPS
	Pump sized adequately as per hydraulic review to provide minimum applicable required turnover rate.
	Adequate manufacturer's cut sheet with performance curve provided.
FIL	TRATION SYSTEMS: SAND FILTER
	Filter sized according to maximum rate of 15 gallons per minute per square foot.
	Adequate manufacturer's specification sheet provided.
	Influent and effluent pressure gauges will be provided for each filter.
	Backwash line will have sight glass.
	When backwash line is draining into a receiving pipe, there must be an air gap.
FIL	TRATION SYSTEMS: CARTRIDGE FILTER
	Filter sized according to maximum rate of 0.33 gallons per minute per square foot.
	Adequate manufacturer's specification sheet provided.
	Influent and effluent pressure gauges will be provided for each filter.
	Layout for ease of operation and maintenance.



FIL	TRATION SYSTEMS: DIATOMACEOUS EARTH FILTER
	Filter sized according to maximum rate of 2 gallons per minute per square foot.
	Effluent pressure gauge will be provided for each filter.
	Influent pressure gauge will be provided for each pressure diatomaceous earth filter
	Influent vacuum gauge vacuum gauge will be provided for each vacuum diatomaceous earth filter.
	Adequate manufacturer's cut sheet documenting filtration provided.
<u>IN</u>	<u>LETS</u>
	An inlet will be provided for every twenty feet of perimeter, or every 300 square feet of surface area or fraction thereof of a standard pool. (Minimum of 2 inlets)
	Inlets will be evenly distributed.
	Floor inlets will have diffuser plates and wall inlets will have eye-ball sockets.
	Inlets will be spaced not more than twenty (20) feet apart.
<u>Sk</u>	<u>KIMMERS</u>
	Adequate number of skimmers will be provided as per hydraulics review.
	Minimum flow through rate of 25 gallons per minute is provided as per hydraulics review.
Gl	JTTERS
	Overflow gutters will extend completely around the pool except at steps or ladders.



M/	AIN DRAIN COVERS FOR FILTRATION AND FOR WATER FEATURES
	All covers adequately sized for total flow, as per hydraulics review. Based on maximum flow from pump performance curve.
	At least two suction outlets spaced at least three (3) feet apart but not more than twenty (20) feet and in a tee configuration provided.
	Covers are compliant with ASME/ANSI A112.19.8 performance standard.
	Adequate manufacturer cut sheets provided.
<u>C</u>	HEMICAL EQUIPMENT: EROSION FEEDERS (CHLORINE/BROMINE)
	Adequate manufacturer's cut sheet provided.
	Increased risk public pools constructed or remodeled after the adoption of these Regulations shall deliver, monitor and control disinfectant and pH chemical feeders through an automated chemical controller.
	Increased risk public pools constructed after the adoption of these Regulations shall be required to use an NSF Standard 50 approved supplemental disinfection treatment system such as ozone or ultraviolent light (UV).
BA	ATHHOUSE REQUIREMENTS
	A minimum of one shower for each gender for facilities less than 4000 square feet will be provided.
	Restrooms shall be provided and meet the following criteria based on peak bather load (assuming 50/50 male to female ratio) as determined by the architect or engineer:
	(a) One toilet, one sink, and one urinal for the first fifty male users. One additional toilet, sink, and urinal for each additional one hundred fifty male users or fraction thereof.
	(b) Two toilets and two sinks for the first fifty female users. One additional toilet and sink for each additional hundred female users or fraction thereof.
<u>TE</u>	<u>ST KIT</u>
	DPD test kit will be provided.



OPERATING INSTRUCTIONS

☐ Operating instructions will be posted in pump room.

The following inspections will be scheduled: piping, sump and final. The piping
inspection will be performed with the pipes completely uncovered and the size
markings turned upwards. A pressure test will be conducted during the piping
inspection. They system must have a minimum of 25 PSI. Annual permit fees must
be paid prior to scheduling final inspection.

REMINDER: If the piping/sump inspections are not scheduled with the local Environmental Health Department, an engineer will be required to provide signed documentation that the piping/sumps were installed as per plans. Otherwise, the concrete may have to be removed for Environmental Health to inspect appropriately.