



ENVIRONMENTAL SERVICES DEPARTMENT
Swimming Pool Plan Review and Construction
1001 N. Central Avenue, Suite 200
Phoenix, AZ 85004
Phone (602) 506-0070
PoolPlanReview@Mail.Maricopa.Gov



Environmental Services
Department

APPLICATION PACKET FOR APPROVAL TO REMODEL A PUBLIC OR SEMI-PUBLIC SWIMMING POOL

Revised: February 3, 2016



CONTENTS:

APPLICATION CHECKLIST
APPLICATION FOR APPROVAL TO CONSTRUCT
CONSTRUCTION CERTIFICATION LETTER
INSPECTION REQUEST FORM
HYDRAULICS INFO SHEET
OWNER AUTHORIZATION LETTER

CONTACT INFORMATION:

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PoolPlanReview@Mail.Maricopa.gov



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PERMIT APPLICATION PROCESS NOTICE

Swimming Pool Program

Steps required to obtain a bathing permit/approval are as follows:

1. Submit complete application along with applicable application fees.
2. After reviewing plans, the Department will issue you an approval to remodel document that includes construction and inspection requirements.
3. Request required progress inspections (if any) using the attached form, and obtain Department approval.
4. When construction is complete and ready for final inspection, submit an inspection request form and a completed notarized construction certification form, using the attached form.

The Department will approve or deny the remodel application in 93 business days or less for a complex remodel or fence remodel and in 52 days or less for a simple remodel, excluding any days the application is returned to the applicant for additional information. This overall licensing timeframe is set by delegation agreement between the Department and the Arizona Department of Environmental Quality.

Department contact information regarding your application

Telephone (application clerk):602-506-0070

E-mail: PoolPlanReview@mail.maricopa.gov

Website: www.maricopa.gov/envsvc/waterwaste/swimpoools/

You may request a clarification from the Department of its interpretation or application of a statute, ordinance, regulation, delegation agreement or authorized substantive policy statement as provided in A.R.S. §11-1609. Contact us by e-mail or telephone, in person or mail at the address listed at the top of the page, marked attention Swimming Pool Program.

*In addition to obtaining a permit from Maricopa County Environmental Services Department, it may be necessary to obtain a permit from your local municipality or Maricopa County Planning and Development Department – if the property is on a County Island.
Please contact these entities for additional information.*



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REGULATORY AUTHORITY

The Maricopa County Environmental Services Department (MCESD) regulates Public and Semipublic Pools and Spas under Delegation Agreements with the Arizona Department of Environmental Quality (ADEQ) and the Arizona Department of Health Services (ADHS) as authorized by the ARIZONA REVISED STATUTES (ARS) 49-107: Local delegation of state authority. The Delegation Agreements between the County (MCESD) and the State simply authorizes the County to regulate Public and Semipublic Pools and Spas using the State’s regulations in addition to the county’s own regulations (the Maricopa County Environmental Health Code (MCEHC)). However, any changes or comments concerning the state regulations should be addressed to the state (ADEQ, ADHS) as only those departments can effect changes to the state regulations, which they promulgate and administer. The Two State Arizona Administrative Codes (AAC) administered by MCESD are R18-5-200 (ADEQ) and R9-8-800 (ADHS).

In addition to regulating Public and Semipublic Pools and Spas by administering State of Arizona rules and regulations, MCESD also regulates Public and Semipublic Pools and Spas by administering the **MARICOPA COUNTY ENVIRONMENTAL HEALTH CODE (MCEHC): CHAPTER VI, BATHING PLACES – PUBLIC AND SEMI-PUBLIC SWIMMING POOLS** as authorized by ARS 49-112: County regulation; standards. This means that MCESD has established within the MCEHC additional rules and regulations for Public and Semipublic Pools and Spas. The main advantage of Maricopa County having its own rules is that it allows the County the flexibility to modify the rules to meet the ever-changing needs of the swimming pool industry. Maricopa County has updated its rules numerous times to meet the changing needs of the swimming pool industry.

As of June 23, 2010, the Board of Supervisors approved the following fees which will take effect on August 1, 2010

FEES FOR REMODEL PLAN EXAMINATIONS

<u>Type</u>	<u>One time Fee</u>	<u>Expedited* Fee</u>
Fence	\$330.00	\$660.00
Deck (simple)	\$165.00	\$330.00
Circulation System		
Split Drains – patch section (complex)	\$440.00	\$880.00
SVRS and/or Pump and/or Drain Covers (simple)	\$165.00	\$330.00
Resurface		
Split Drains (complex)	\$440.00	\$880.00
Drains already to Code (simple)	\$165.00	\$330.00
Disinfection System (simple)	\$165.00	\$330.00
Water Feature / Approved Toys (complex)	\$440.00	\$880.00

Two or more simple remodels on the same body of water – *if submitted on the same application* - require a simple fee (i.e. deck & disinfection) * A fence remodel requires its own, separate fee*

*** - Plans submitted after the project has started or is completed must be expedited**



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SWIMMING POOL/SPA HYDRAULIC DESIGN GUIDELINES

TDH (skimmer pool with sand filter)

FEET FROM DRAIN:	1 – 25	26 – 50	51 – 75	76 – 100	101 – 125	126 - 150
HEAD (FT):	55	60	65	70	75	80

MAX FLOW RATES (PVC: C=140)

PIPE SIZE (IN):	1.25	1.5	2.0	2.5	3.0	4.0	6.0
PRESS SIDE (GPM):	25	60	90	140	220	350	800
SUCT. SIDE (GPM):	15	35	50	80	130	220	450

MAX VELOCITIES

PRESSURE SIDE - 10ft/sec **SUCTION SIDE** – 6 ft/sec

TURNOVER RATES

SPA – 30 MIN **SWIMMING POOL** – 8 HRS **WADING POOL** – 1 HR

NUMBER OF SKIMMERS REQUIRED

SPA, WADING POOL: 1 skimmer per 200 ft²

SWIMMING POOL: 1 skimmer per 400 ft² (min. of 2 skimmers)

3 OR MORE SKIMMERS REQUIRES A CLOSED LOOP

MINIMUM PIPE SIZES (BASED ON SKIMMER FLOW CONTROLLING)

	<u>main drain</u>	<u>skimmer</u>	<u>return</u>	<u>flow (gpm)</u>
2 skimmer	1.5"	2"	1.5"	54
3 skimmer	2"	2.5"	2"	81
4 skimmer	2.5"	3"	2.5"	108
5 skimmer	2.5"	3"	3"	135
6 skimmer	3"	4"	3"	162

NUMBER OF RETURNS (INLETS) REQUIRED

(SWIMMING POOLS – 6 MINIMUM ON CLOSED LOOP; SPA, WADING POOL – 1 PER 15 LF OF PERIPHERY; 3 OR MORE REQUIRES CLOSED LOOP)

PERIMETER:	90	105	120	135	150	165	180	195	210	225	240	255	270	285	300	315
# of RETURNS:	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21

ALL PIPING MUST PASS A PRESSURE TEST AT 25 PSI FOR 30 MIN

For additional information, please visit our website at: <http://www.maricopa.gov/EnvSvc/WaterWaste/>



Application for Approval to Remodel

All information (except signatures) must be typed / printed clearly

A change in the *SIZE, SHAPE, or DEPTH* of a pool or the *INSTALLATION OF DIVING EQUIPMENT* requires the submittal of a "NEW CONSTRUCTION" set of plans, applications and fees).

Project Name: _____

Identifier (north pool/office spa, etc): _____

Complete ALL the required information for the type of remodel or it will be considered an "incomplete" submittal and placed on hold.
 ALL LINES ON PAGE 1 OF THE APPLICATION ARE REQUIRED AS WELL AS SIGNATURES.

The enclosure - Submit

- Site Plan showing the location of the new fence, showing what is new and existing – Show any buildings that are within the pool area of have doors that enter the pool area.
- Fence and gate details

Complete items: 39, Provide details as shown in the fence guidance section of the remodel check list:
<http://www.maricopa.gov/EnvSvc/WaterWaste/SwimPools/pdf/SPP%20ATR%20Check%20List.pdf>

Simple Resurface – (Drains were split prior to this remodel) - Submit

- Drain covers cut sheets
- Pump cut sheets with pump curves, make and model
- If more than 4 drain covers, provide pool schematic showing location of drain covers, and pump info for each corresponding drain cover

Complete items: 22-24, 26, 28-37, 39

Complex Resurface (Drains split as part of this remodel) - Submit

- Dual main drain detail
- Drain Covers cut sheets
- Pump cut sheets with pump curves
- If more than 4 drain covers, provide pool schematic showing location of drain covers, and pump info for each corresponding drain cover

Complete items: 22-24, 26, 28-37, 39

Removal and replacement of the deck - Submit

- Deck plan with deck replacement material. Provide site plan showing new and existing deck
- Product name, color and coefficient of friction test results for materials other than concrete
- Depth markers and No Dive markers information
- Freeboard details
- Cantilever details
- Complete description of scope of work to be done

Complete items: 39

Adding or changing water feature or toy or rock feature - Submit

- Detailed water feature description
- Architectural plan profiles
- Plumbing schematics with pump curves and cut sheets

Complete items: 32-34, 36-38, 39

Changing the disinfection system - Submit

- Manufacturer's documentation on the proposed system
- Chlorine production rate
- Location of the installation and number of cells installed

Complete items: 22-23, 27, 39

A change to the circulation system including pump, filter, and piping - Submit

- Plumbing schematics / pipe size and pump filter configuration
- Drain Covers cut sheets showing rate flow
- Pump cut sheets and curve (existing and proposed)
- Filter information – make, model and capacity (existing and proposed) cut sheet

Complete items: 22-25, 30-38, 39



APPLICATION FOR APPROVAL TO REMODEL
A PUBLIC OR SEMI-PUBLIC SWIMMING POOL OR SPA

REMODEL MCESD # _____ District # _____

MCESD _____ APN #: _____ Site Loc: _____

CHECK ALL THAT APPLY

- SEMI-PUBLIC PUBLIC Diving Non-Diving
 Pool Spa Wading Pool Special Use

- Is this pool/spa under Enforcement / Stipulations Agreement: YES NO
 Has the remodel started or is already completed: YES NO
 Has the Ownership changed in the last 6 months: YES NO

FACILITY INFORMATION

- 1 To Serve (Facility Name and Type): _____
 2 Pool Identifier: (north/office/round) _____
 3 Pool Address: _____ City: _____ Zip: _____
 4 Facility Contact Name: _____ Phone #: () _____
 5 Email Address: _____
 6 Facility Entrance Code: _____ Pool Gate Code: _____

OWNER INFORMATION

- 7 OWNERSHIP Name: _____ Phone #: () _____
 8 Address: _____ FAX #: () _____
 9 City: _____ State: _____ Zip: _____
 10 Owner's Email Address: _____
 11 Management Company's Name: _____ Agent's Name: _____
 12 Address: _____ State: _____ Zip: _____
 13 Phone #: () _____ FAX #: () _____
 14 Email Address: _____

CONTRACTOR/ENGINEER/ARCHITECT INFORMATION

- 15 POOL Company Name: _____
 16 POOL CONTRACTOR/ENGINEER/ARCHITECT'S Name: _____
 17 CONTACT Name: _____ Phone #: () _____
 18 AZ Registration/License #: A9 A19 KA5 KA6 Other _____
 19 Address: _____ FAX #: () _____
 20 City: _____ State: _____ Zip: _____
 21 Email Address: _____



To Serve (Facility Name and Type): _____

DESIGN DATA

A change in the *SIZE, SHAPE, or DEPTH* of a pool or the *INSTALLATION OF DIVING EQUIPMENT* requires the submittal of a "NEW CONSTRUCTION" set of plans, applications and fees).

22 **Perimeter (ft):** _____ **Surface Area (ft²):** _____ **Ave. Width (ft):** _____ **Length (ft):** _____

23 **Average Depth:** _____ **(ft)** **Volume (gal):** _____ **(gal)** **Heated:** **Yes** **No**

24 **Skimmers (number of):** _____ **Returns/Inlets (number of):** **Wall:** _____ **Floor:** _____

25 **Filter Type:** Sand **Qty:** _____ **D. E.** **Qty:** _____ **Cartridge** **Qty:** _____
(20 gpm/ft² max flow) (2 gpm/ft² max flow) (0.375 gpm/ft² max flow)

Manufacturer: _____ **Model #:** _____

26 **Fully Describe Finish (Plaster, PebbleTec, Color, etc.):** _____

27 **Chlorinator Make/Model:** _____
 NSF Approved **Yes** **No** **Erosion** **Liquid** **Gas** **Salt**

28 **Existing Dual Main Drains, at least, 3 ft apart** **Yes** **No** **(Drains must be split when resurface takes place)**

29 **Existing Therapy Suction, at least, 3 ft apart** **Yes** **No** **N/A**

30 **Main Drain Covers Being Replaced**
 Wall **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____
 Floor **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____

31 **Therapy Suction Covers Being Replaced**
 Wall **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____
 Floor **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____

32 **Water Feature Suction Covers Being Replaced**
 Wall **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____
 Floor **N/A** **Yes** **No** **Make** _____ **Model** _____ **Size** _____

33 **Variable Speed Pump** **Yes** **No** **Commercial:** **Yes** **No**
Make _____ **Model** _____ **Speed Setting** _____

34 **Main Circulation Pump:** **Qty** _____ **Make** _____ **Model** _____ **HP** _____ **Run** _____ **(ft)** _____

35 **Therapy/Booster Pump:** **Qty** _____ **Make** _____ **Model** _____ **HP** _____ **Run** _____ **(ft)** _____

36 **Water Feature Pump:** **Qty** _____ **Make** _____ **Model** _____ **HP** _____ **Run** _____ **(ft)** _____

37 **SVRS Pump Being Installed:** **Yes** **No** **Make** _____ **Model** _____

38 **SVRS Unit Being Installed:** **Yes** **No** **Make** _____ **Model** _____



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To Serve (Facility Name and Type):

39 Description of work: (attach any relevant documents, cut sheets, samples, plans, explanations, etc.)

Provide outline of pool/spa showing skimmers, return, drains, suction, floor returns, depth markings, steps and benches along with pool/spa dimensions. Does not need to be scaled.

SIGNATURES

By signing below, the Engineer, Architect or Contractor certifies that he/she is familiar with all State and County Code requirements applicable to this project and that this bathing place will be constructed and operated in accordance with the Maricopa County Environmental Health Code governing design, construction and operation of public and semi-public bathing places. By signing below as Owner, certification is made that the signer is an authorized agent for the true ownership, and that the ownership information above is correct.

40 Architect, Engineer or Contractor's Signature:

Architect / Engineer Seal the application and plans

41 Printed Name:

Date:

42 Pool Owner's Signature:

Title:

43 Printed Name:

Date:

All Applications MUST contain name of owner / or authorized agent (letter of authorization must be submitted if signed by agent)

One application per body of water. **Original application, plans and additional specifications or calculations must be submitted with the applicable Fee.**

One original copy of manufacturers' specifications / cut sheets on each piece of equipment is required.

Signatures must be original on the application and **All plans must have architect/ engineer/contractor of record's original signature and date.**

Revised plans and applications must have the revision date, the word "REVISED" and an original signature for the Contractor/Architect/Engineer. **Architects and Engineers must be registered in Arizona and SEAL THE APPLICATION AND PLANS.**

Certification that the pool is constructed in accordance with approved plans and specifications must be submitted with final inspection request and before the permit to operate the pool for use is issued. The **PERMIT TO OPERATE WILL NOT BE ISSUED FOR UNCERTIFIED POOLS.**



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AUTHORIZATION LETTER

Complete this form if the Property Owner is not signing the application

Date: _____

Project Name: _____

Address: _____

I hereby authorize _____, of
 _____ firm to file this
 application and act on my behalf for the project listed above.

Project Owner / Responsible

Party Name / Title:
 (Please print clearly) _____ Name _____ Title

_____ Signature _____ Date

If management company representative signs for owner, please provide documentation of legal of representation.

NOTES: Project Owner's / Responsible Party's information must be on application.

*** Engineer/Architect/Contractor cannot sign this form as Project Owner / Responsible Party ***

**** The Department reserves the right to request any other information ****



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Inspection Request Form

Incomplete or incorrect information will cause delays on the inspection time

Project Name: _____

Identifying Name (East, Casita, Office, etc) _____

Project Address: _____

Gate Code: _____ **Combination Lock Code:** _____

MCESD #: _____

Contact Name: _____ **Phone #:** _____

Pool Spa Wading Splash Pad Special Use

Contractor: _____ **Fax:** _____

Email Address: _____

Type of Inspection

Rough Plumbing Inspection
 Rough Plumbing Re-inspection

Pre-plaster Inspection (New Construction Only)
 Pre-plaster Re-inspection

Final Inspection (*Notarized Construction Certification Letter REQUIRED for this inspection*)

New Pool Resurface Fence
 Deck Circulation Disinfection
 Final Re-inspection

Comments: