



ENVIRONMENTAL HEALTH

2100 NE Wyatt Court, Bend, Oregon 97701
Telephone (541) 317-3114, Fax (541) 322-7604

www.deschutes.org/health

Dear Pool/Spa Operator:

In response to your inquiry concerning the opening of a new pool or spa, enclosed please find a packet of information designed to help you.

If you are proposing a new pool or spa, complete the attached Pool/Spa Plan Review Application form and submit 2 copies of the pool plans along with the required fee for each pool or spa. Plan specifications (enclosures #1 and #2) must be complete, either in table form on the plans, or on separate sheets, before plans can be reviewed.

If you are making any remodeling changes to an existing pool/spa, an approved plan review is also required. All new pool/spas, all pools/spas not previously licensed, and pools/spas that have not been licensed for the previous 12 months, must comply with all the current rules regarding plumbing, construction and equipment.

Please note: This plan review is for public health purposes only. Other reviews, permits, etc. by other agencies or department are your responsibility. A list of agencies you may need to contact is printed at the end of this letter.

You are also required to obtain an Environmental Health Pool/Spa Construction Permit. Two "Construction Inspections" are required: a plumbing-pipe inspection and a 2nd pre-plaster construction inspection. Please contact this office to schedule the construction inspections.

The following requirements must be met prior to issuance of your annual operating license:

- The license fee for each unit must be paid. That includes a Tourist Facility license if a motel/hotel is also opening to the public.
- A "pre-opening inspection" conducted and approved when your facility is completed, all equipment installed, pool/spa is filled, and the recirculation and chlorination systems are in operation. All safety and testing equipment must be in place.
- All permits, i.e., building, mechanical, electrical, plumbing, other permits that may be required, must be finalized, and a Certificate of Occupancy issued.

The pool/spa may not be used until the license has been issued. Pool/spa licenses expire December 31st of the year issued.

Our Mission: To Promote and Protect the Health and Safety of Our Community.

If you would like a copy of the Oregon State Pool or Spa Rules, please feel free to call us with a request, or visit our office for a complimentary copy of these rule books. Or you may view a copy of the rules through our website www.deschutes.org/cdd/pools. Or, you may go directly to the State pool/spa rules at <http://oregon.gov/DHS/ph/pl/rules.shtml>.

If you have any pool questions, please do not hesitate to call us at (541) 322-7400 or (541) 388-6598.

Sincerely,

ENVIRONMENTAL HEALTH DIVISION

John Mason, R.E.H.S.
Registered Environmental Health Specialist

JWM/slr July 2010

AGENCIES YOU MAY NEED TO CONTACT

DESCHUTES COUNTY

Planning Division	(541) 388-6575
Building Safety Division (Building/Plumbing/Electrical)	(541) 388-6575

CITY OF BEND

Planning Department	(541) 388-5580
Building Department	(541) 388-5528
Sewer	(541) 317-3000
Business License	(541) 388-5580

CITY OF REDMOND

Planning Division	(541) 923-7721
Building Division	(541) 923-7721
Sewer & Water	(541) 504-2000
Business License	(541) 923-7726

CITY OF SISTERS

Business Office	(541) 549-6022
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Deschutes County Pool / Spa Plan Review

Enclosure #1 - Submit the following:

Plans 33-60-030

- (1) Plans and specifications shall be prepared by a professional engineer or architect registered in the State of Oregon. Specific exemptions to this requirement may be granted by the Division, where in the judgment of the Division no architectural or engineering problems are presented and the plans accurately depict the proposed pool and address all requirements of these rules.
- (2) Plans shall be submitted in duplicate, drawn to scale and shall include:
 - (a) One plan view.
 - (b) One longitudinal section.
 - (c) One transverse section through the main drain.
 - (d) One overall plan showing the pool in relation to other facilities in the area. Include enclosure (fence and gate) details. (This plan may be combined with (2)(a) of this section.)
 - (e) One detailed view of the equipment room layout.
 - (f) One vicinity map.
 - (g) One piping schematic showing piping, pipe size, inlets, main drains, skimmers, gutter outlets, vacuum fittings, and all other appurtenances connected to the pool piping system. (This plan may be combined with (2)(a) of this section.)
 - (h) One cross section of the step treads and risers.
- (3) Plan notes such as "fence by owner" or "deck to be under separate contract" shall not be acceptable as a substitute for scale drawings.
- (4) Plans shall include the following information in tabulated form:
 - (a) Legal address of the facility.
 - (b) Location of the facility if different from legal address.
 - (c) Owner's name, address and telephone number.
 - (d) Surface area of pool.
 - (e) Pool volume, turn over time, flow rate, filter rate/unit area, type of filter and total system head loss.
 - (f) Manufacturer, make and model numbers of the pump, filter and automatic chemical feed apparatus, filter head loss (clean and dirty), and pump curve showing design flow rate and head.
 - (g) Source of water used at the pool.
 - (h) Means of disposing backwash water.

Pool Plan Review Enclosure #2

POOL / SPA / WADING POOL EQUIPMENT SPECIFICATIONS & PLANS

Pool Name: _____ Pool address: _____

City : _____ Zip _____

Each item listed below must be completed before your application for a pool construction permit will be accepted. Those items that do not apply, fill in "N/A" (not applicable). Also required; provide a **Pump Curve** for each pump that will be installed.

Pool / Spa Volume; _____ Design Turn Over Rate _____ gpm

Pump (recir): Manuf. _____ Model #: _____

Horsepower: _____ G.P.M. @ 60' TDH: _____ @ 40 TDH _____ gpm

Pump (jet/feature): Manuf. _____ Model #: _____

Horsepower: _____ G.P.M. @ 60' TDH: _____ @ 40 TDH _____ gpm

Filter Type; sand, cartridge, D.E. : Manuf: _____

Model #: _____ Filter surface area in feet² _____

Skimmer: Manuf: _____ Throat Width: _____ Pipe size: _____

*****Main drain circulation;** Manuf: _____ Model; _____ Dimensions _____

Open area: _____ inches² Pipe size: _____

*****Main drain jet / feature;** Manuf: _____ Model; _____ Dimensions _____

Open area: _____ inches² Pipe size: _____

*****INCLUDE;** Manufacturers' Specification Sheet with approved velocity, open area [in²] and a picture of the grate.

Pipe type; *Circle one;* Sch 40? Sch 80 ? **Recirc. / Jet returns:** Manuf ; _____

Chlorinator: Manuf: _____ Model #: _____ CL type: _____

List secondary disinfection type and manuf. if using _____

Flow Meter: manuf. and model # _____ Flow range (gpm): _____

Located with 18" of straight pipe in front of the meter and 12" after, easily visible.

Pool interior finish: _____ Color: _____

Depth markers; show installation on top of deck and along tile line-(for pools and waders) (Spas need deck only).

Deck Material: _____ **Finish:** _____ **Coping type:** _____

Slope of deck; _____ **Decks drain to?** Landscaping or deck drains? Explain _____

Underwater light manuf: _____ Number of lights _____ G.F.C.I. YES / NO

Source of fresh water? City water, Private well; Provide well log # _____

How will water be added to the pool? Direct connection to circulation piping, Over the coping, or through tile line?

List freshwater protection method and model # _____

Filter backwash disposal to: Sewer? Septic tank and drainfield? Show drainfield permit approval _____

Be sure to show the following on the plan drawings;

Show filter backwash air gap if applicable. Show all trunk and branch piping/size. Show hydraulic balance.

Show tread depth and rise of all stairs and ladders. Show nosing on lip of stairs & benches? Show handrail(s).

Show enclosure fence layout and dimensions, including door/gate; swing, latch type and height of latch.

Example language on all required warning and rules signs. Deck dimensions (overhead view).

Equipment room; dimensions, floor drain, equipment location, chemical storage, ventilation & hose bib.

Show H.V.A.C. intakes, returns, make up air and equipment room vents. Show air handling equipment location if installed in the pump room.

Show location of; toilets, sinks, showers, diaper changing station.

Show location of; emergency phone, Spa jet timer switch and spa emergency shut off switch.

Show location of other equipment; slides, fountains, lazy river.

For pool with gutters; show gutter dimensions, dropouts, all piping and surge tank dimensions / capacity.

APPLICATION FOR ENVIRONMENTAL HEALTH SWIMMING POOL/SPA PLAN REVIEW

Pool or Spa Business Name _____

Specific address of Pool/Spa _____

Owner Name _____

Owner Address _____ City/State/Zip _____

Owner Telephones: #1 _____ #2 _____

Builder Name _____ Phone _____

Builder Address _____ City/State/Zip _____

Architect Name _____ Phone _____

Architect Address _____ City/State/Zip _____

Responsible Agent _____

Responsible Agent Telephones _____ 2nd line _____

Circle one: New Remodel

If remodel, briefly describe changes you plan to make: _____

Projected Opening Date _____ Is there a motel/hotel associated with this pool/spa? _____

Pool/Spa Plan Review **(PPR)** call for current price

Pool/Spa Construction Permit **(CPP)** call for current price

Staff: Collect PPR and CPP fee for each pool/spa vessel at time of plan review application

PLEASE NOTE: The Environmental Health Pool/Spa Plan Review is for public health purpose ONLY. Additional reviews, permits, etc., by other agencies or departments are the customer's responsibility.

Signature of Applicant _____ Date _____

If you have any questions, please call (541) 388-6598.

For Office USE:

PLAN REVIEW - Fund code **PPR** RECEIPT # _____ STAFF INITIALS _____

CONSTRUCT PERMIT - Fund code **CPP** RECEIPT# _____ DATE RECEIVED _____

Pool Plan Review # _____ COMPUTER # _____

PlanReviewPackets/Pool/JWM:slr 07/2010