Office Use Only: ID #	Date Issued	Exp. Date	Ck #	Amount Rec.			
STATE OF MAINE	HEALTH INSP	<b>PECTION PROGI</b>	RAM				
LICENSE APPLICATION FOR Public Pools/Spas							
Applicant Info	rmation						
Business Name							
Physical Work Location, E	-911 Address:		Town/City, Zip C	ode:			
Contact Phone #		Contact Fax#					
Mailing Address; Town/Cit	ty, Zip Code:						
Contact Person's Name: _		E-mail Address (	Print):				
Certified Pool Operator (Cl	PO) Certificate:						
THERE IS A 30 DAY RE APPLICATIONS WILL NOT OPERATE UNTIL AN INSPI	BE REVIEWED AND	WILL BE RETURNED F	OR COMPLETION.				
	PLEASE SUBMIT THE	E FOLLOWING WITH TI	HIS APPLICATION				
Please enter the number of p copy of your valid Certified P Form and Appendix C with y	Pool Operator certificate	e. If you have a new pool	l or spa, you must in				
Number of Pools Ins Number of Spas Insi	ide Nu ide Nu	umber of Pools Outside_ umber of Spas Outside_					
	License	Fee Total \$					
DUE	BLIC POOLS/SPAS		FEE				
First Pool/Spa			\$50.00				
	as		\$25.00 each	1			
	IT NAME CLEARLY	_, Owner/Operator of the	e business, <b>hereby</b> :	state that this			
application is accurate		wledge I further stin	late that I am awar	e that deliberate			
	-			to operate the business.			
				•			
Discovery of deliberate							
me to penalties, fines a				, as well as the			
imposition of any othe	r penalties, fines and	sanctions provided by	law.				
Applicant's Signature			Date of Signatur	re			
Make check payable to	: Treasurer, State of I	Maine					
Please mail to	HEALTH INSP	PECTION PROGRA	М				

#### HEALTH INSPECTION PROGRAM 286 WATER STREET 3<sup>rd</sup> FLOOR 11 STATE HOUSE STATION AUGUSTA ME 04333-0011

#### Public Swimming Pool and Spa Registration Instructions

When submitting an application for review of a public swimming pool & spa to the Division of Environmental and Community Health, the applicant and/or designer must include the following for a complete application:

- (1) A completed public pool/spa application.
- (2) Department of Health and Human Services Swimming Pool Registration Form.
- (3) Plan(s) of the pool showing depths, area, piping, and safety features, complying with the National Spa and Pool Institute's *Minimum Standards for Public Swimming Pools*. Plans submitted for approval must be drawn to a scale of <sup>1</sup>/<sub>4</sub> inch equals 1 foot, except that plans for public spas must be drawn to a scale of 1 inch equals 1 foot showing depths, area and safety features, complying with the appropriate standards referenced in Section 2 (B) of the Rules Relating to Public Pools and Spas, Ch. 202 (See Appendix A).
- (4) A completed Appendix Pool/Spa to demonstrate adequate wastewater disposal system capacity for the use proposed. This form must be presented to the Local Plumbing Inspector of the municipality where the facility is located for review and approval of wastewater disposal system capacity.
- (5) Plans and manufacturer's specifications for pumps, filtering, and sanitizing equipment including all interconnecting piping and control valves.
- (6) A pre-operational inspection is required. The Department must be notified at least 15 days in advance of placing the pool or spa in operation to allow for inspection and approval.

# Upon receipt of all of the above, the Department will review your request. Please allow 30 working days for the review.

If you have any comments or question, please feel free to contact us.

## REGISTRATION FORM FOR PUBLIC SWIMMING POOL AND SPA

1.	Owner/Operator of Pool:						
2.	Establishment:						
3.							
	Capacity in Gallons:						
5.	Dimensions for In-Ground Pool: Length:FT. Width:FT. Surface Area:FT <sup>2</sup>						
	Greatest Depth:FT. Minimum Depth:FT. Maximum Bottom Slope:%						
	Dimensions for Above Ground Pool: Round: Depth:FT. Diameter:FT.						
	Greatest Depth:FT. Minimum Depth:FT.						
	Maximum Bottom Slope:% Square or Rectangular: LengthFT.						
	WidthFT. Surface Area:FT <sup>2</sup> Greatest Depth:FT.						
	Minimum Depth:FT. Maximum Bottom Slope:%						
6.	Dimensions for Spa: Depth:FT. Diameter:FT.						
7.	Recirculation Pump Capacity:GPM						
8.	Turnover Rate in Hours:HRS.						
9.	0. Type of Filter (Check One) Sand Filter { } High Rate Sand Filter { } Diatomaceous Earth { } Cartridge						
	Filter{ } Other, Specify:						
	Loading rate: Recirculation Rate GPM/SQ. FT. Filter Area SQ. FT.						
10	. Method of Filter Backwash Disposal:						
	If other than public sewer, submit Appendix A.						
11	. Diameter of Recirculation Piping:(inches)						
12	. Number of Skimmers:						
13.	Size of Gutter: (REQUIRED IF POOL SURFACE AREA IS GREATER THAN 1600 SQ FT.)						
14. Height of Broad (if any): Depth of water 12 feet beyond end of board:							
R	EQUIRED DEPTH FOR DIVING BOARD OR PLATFORM: 8'-6" FOR 2' BOARD HEIGHT OR LESS; 10'-						
0	" FOR 1 M. BOARD HEIGHT OR LESS.						
15	. Purification equipment:						
16	. Amount of chemicals used per day, in pounds						
	Chlorine: Alum:						
	Soda Ash: Other:						
17	. Fresh Water Supply Source:						
18	. Average Bathing Load per day:						
	Number of Showers: Location:						
	Number of Toilets: Urinals: Location:						
	My pool meets relevant ANSI standards specified in Maine's Rules Relating to Public Swimming						
	Pools and Spas (10-144 CMR, Chapter 202), and was approved by a Maine-licensed professional						
	engineer unless exempted by the Department.						

Maine Professional Engineer Signature and Stamp: \_\_\_\_\_\_Date: \_\_\_\_\_

My commercially available SPA/Hot Tub includes certification from the manufacturer or supplier that it meets the minimum standards for public spa design and operation set forth by the American National Standard for Public Spas (ANSI/NSPI-2 1999), as amended. (please provide certification)

#### Appendix B

## STATE OF MAINE RULES RELATING TO PUBLIC POOLS AND SPAS CHAPTER 202 EXCERPT

## SECTION 2. REGISTRATION, PLANS AND CONSTRUCTION

#### A. Registration

- 1. No city, town, village, plantation, institution, school, civic club, organization, person, firm or corporation, may operate or maintain any public pool or spa without first having registered the same with the Department. Forms for this purpose are available from the Department.
- 2. Any residential pool or spa located on the premises of a lodging establishment licensed by the Department and not intended for the use of the facility guests or clients must be clearly posted as not available for public use.
- B. Approval of Plans
- No city, town, village, planation, institution, school, civic club, organization, persons, frim or corporation may construct any public pool or spa, or make changes in any already built or in the appurtenances thereof, until the plans have been submitted to, and approval received from the Department. Applicable standards for all new and modified public pools and spas are listed in Sections 2(B)(2) through 2(B)(6). Copies of the standards are available for inspection at the Department offices during normal business hours.
- 2. Minimum standards for in-ground public pool design and operations (Class A, B, C, and F) are those set forth by the American National Standards for Public Swimming Pools (ANNSI/NSPI-1 2003) as amended.
- 3. Minimum standards for above-ground or on-ground public pool design and operations (Class C) are those set forth by the American National Standard for Aboveground/ On-ground Residential Swimming Pools (ANSI/NSPI-4 1999), as amended.
- 4. Minimum standards for public spa design and operation are those set for by the American National Standard for Public Spas (ANSI/NSPI-2 1999), as amended.
- 5. Minimum standards for all Class D pool design and operation are those set forth by the American National Standard for Aquatic Recreation Facilities (ANSI/IAF-9 2005) as amended.
- 6. All Class A, B, C, and F public pools and all public spas, must comply with the specifications in Section 6(E), Entrapment prevention for Public pools/spa.

#### Appendix Pool/Spas **Onsite Wastewater Disposal System - Local Review and Verification Form**

This form is to be used by Health Inspection Program license applicants to demonstrate that their facility has adequate wastewater disposal system capacity for the use proposed. This form must be presented to the Local Plumbing Inspector of the municipality where the facility is located for review and approval of wastewater disposal system capacity. The operator must obtain permission from the Department of Environmental Protection (DEP) or other proper authority, before any pool water is disposed of in a public sewer system, on any surface or into any body of water.

#### Please include this completed form with your license application.

To be completed by the Owner/Applicant for new	Date:		
Facility Name:			
Facility Physical Address:			
Facility: [] Owner [] Operator:			_
Telephone:	E-Mail		
Mailing Address if different from address above:			

Please have the Local Plumbing Inspector at your town office verify that he/she has reviewed your proposal and has determined that: A) the existing wastewater disposal system has the capacity required for your proposal Public Pool or Spa Water Disposal. **B**) Backwash Disposal **1**. The operator must obtain permission from the proper authority before any backwash is disposed of in a public sewer system. 2. No backwash may be disposed of on any surface or in any body of water. 3. Backwash may be discharged in an approved subsurface wastewater disposal system sized, designed and installed in conformance with the Maine Subsurface Waste-water Disposal Rules, 10-144 CMR, Chapter 241. 4. Backwash water must enter the approved disposal system through an air gap that is at least 1.5 times the backwash pipe diameter, or other LPI or Department-approved method to prevent backflow. Uses that increase wastewater disposal system design flows by more than 25%, including prior unapproved increases, must be installed at the time of expansion or change of ownership as required in Section 9 of the Maine Subsurface Wastewater Disposal Rules.

## To be completed by the Local Plumbing Inspector:

#### MANDATORY: LPI please write in number of indoor/outdoor pools/spas

POOLS IN POOLS OUT SPAS IN SPAS OUT

(To request a record search for difficult to find permits please visit www.mainepublichealth.gov/septic-systems)

\_\_\_\_\_, the undersigned, have reviewed the proposal for the subject I. property and find that the property is either served by an existing wastewater disposal system that meets the design requirements for the proposed use or the applicant has submitted an application for an expanded system design (and installation if required by the Expansion section of the Rules) that meets the design requirements of the Rules and any relevant local ordinances for the proposed use.

LPI Signature Date

LPI Printed Name