

**STATE OF MAINE HEALTH INSPECTION PROGRAM
 LICENSE APPLICATION FOR Public Pools/Spas**

Applicant Information

Business Name _____

Physical Work Location, E-911 Address: _____ Town/City, Zip Code: _____

Contact Phone # _____ Contact Fax# _____

Mailing Address; Town/City, Zip Code: _____

Contact Person's Name: _____ E-mail Address (Print): _____

Certified Pool Operator (CPO) Certificate: _____

THERE IS A 30 DAY REVIEW PERIOD AFTER RECEIPT OF A COMPLETED APPLICATION. INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED AND WILL BE RETURNED FOR COMPLETION. IT'S ILLEGAL TO OPERATE UNTIL AN INSPECTION IS PERFORMED AND A LICENSE IS ISSUED.

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION

Please enter the number of pools you have below and submit this application to our offices with the appropriate fee and a copy of your valid Certified Pool Operator certificate. If you have a new pool or spa, you must include the Registration Form and Appendix C with your application in order to obtain your public pool/spa license.

Number of Pools Inside _____ Number of Pools Outside _____
 Number of Spas Inside _____ Number of Spas Outside _____

License Fee Total \$ _____

PUBLIC POOLS/SPAS	FEE
First Pool/Spa	\$50.00
Additional Pools/Spas	\$25.00 each

I, _____, Owner/Operator of the business, **hereby state that this**

PLEASE PRINT NAME CLEARLY

application is accurate to the best of my knowledge. I further stipulate that I am aware that deliberate falsification of the information herein shall be sufficient cause for denial of a license to operate the business. Discovery of deliberate falsification of information on this application after a license is issued may subject me to penalties, fines and other sanctions authorized by licensing statutes and rules, as well as the imposition of any other penalties, fines and sanctions provided by law.

Applicant's Signature _____ Date of Signature _____

Make check payable to: Treasurer, State of Maine

Please mail to

**HEALTH INSPECTION PROGRAM
 286 WATER STREET 3rd 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 ¼ 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. Location of Pool/Spa: Indoor { } Outdoor { }
 4. Capacity in Gallons: _____
 5. Dimensions for **In-Ground Pool**: Length: _____ FT. Width: _____ FT. Surface Area: _____ FT²
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: Length _____ FT.
Width _____ FT. Surface Area: _____ FT² 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. 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 Board (if any): _____ Depth of water 12 feet beyond end of board: _____
REQUIRED 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 was built after September 14, 2020, 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.

Maine Professional Engineer Signature and Stamp: _____ Date: _____

**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

1. No city, town, village, plantation, institution, school, civic club, organization, persons, firm 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 pool construction

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)

I, _____, the undersigned, have reviewed the proposal for the subject 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 _____