



Pool Drain Safety (VGB) Compliance Data

Permit cannot be issued if application is incomplete

A separate form is required for each pumping system

Name of Pool _____ Permit Number _____

Address _____

1. **Number of Pumps Per Pool** _____ (one form for each pumping system, see pg. 3)

2. **Pump Flow**

Pump Manufacturer _____ Model # _____ Horsepower _____

Maximum Pump Flow Maximum flow rate from pump curve: _____ gpm. (Provide supporting evidence if flow reduction)

3. **Drain Sump Measurements** This is the area under the floor drains, if field-built sump may need to remove drain cover one time to measure. (Check here if sumpless _____, then proceed to next section) **Data Not required for DCo Annual Permitting unless**

Sump shape: Round- width: _____ inches diameter OR Square- _____ in X _____ in

Sump minimum depth _____ inches Diameter of outlet pipe in sump _____ inches

Distance of top (inside) of outlet pipe from bottom of cover/grate _____ inches

Sump manufacturer and model # if available _____

4. **Drain Cover/Grate Data**

Number of drains on each pump _____ Distance between drains (on centers) _____ in

Cover/grate manufacturer _____, model _____, Lifespan: _____

Maximum flow rating of cover/grate _____ gpm (floor); _____ gpm (wall)

Date drain cover/grates installed: _____ EXPIRATION DATE: _____

5. **Equalizer Covers**

Number of operable skimmer equalizers _____ OR

Have the equalizers been disabled? Yes _____ No _____



Equalizer fitting Manufacturer _____, model _____,

Lifespan _____

Equalizer fitting maximum flow rating _____

Date equalizer cover/grates installed: _____ EXPIRATION DATE: _____

6. Safety Vacuum Release System (SVRS) – SVRS required if dual drains are closer than 3 feet on center or pump has a single drain with blockable cover or sump.

Safety Vacuum Release System manufacturer - _____

Vacuum line- Choose One

_____ No vacuum line in pool OR

_____ Protective cover on vacuum lines installed before May 1, 2010 OR

_____ Self-closing, self-latching cover designed to be opened with a tool on vacuum lines installed after May 1, 2010

Contact Address _____

City _____ ST _____ ZIP Code _____

Contact Person _____ Office Phone Number _____

Fax Number _____ Email _____

Full name of person providing this information _____

Signature _____

Date _____



Instructions for Completion and Submission of Pool Drain Safety Compliance Data Form

Please review the instructions below to ensure the Pool Drain Safety Compliance Data form is properly completed and submitted with all information required. All submissions will need to be approved and verified by the Health Department prior to the issuance of an operation permit for the pool in accordance with Rule .2539(c).

POOLS WITH MULTIPLE PUMPING SYSTEMS MUST SUBMIT A FORM FOR EACH PUMPING SYSTEM.

1. PUMP FLOW – Enter the maximum flow from the manufacturer’s pump performance curve. Pump curves can be found online at <http://ehs.ncpublichealth.com/faf/pti/drainsafety.htm> and <http://charmeck.org/mecklenburg/county/HealthDepartment/EnvironmentalHealth/PublicSwimmingPools/Pages/default.aspx>
2. DRAIN SUMP MEASUREMENTS – Measurements are needed to determine the size of the cover/grate and to assure the sump is deep and wide enough to meet the requirements in the cover/grate manufacturer’s specifications. Information on documenting the size of the drain sump can be found at: <http://ehs.ncpublichealth.com/faf/pti/drainsafety.htm>
3. DRAIN COVER/GRATE DATA – Enter the manufacturer, model, lifespan expiration date and maximum flow for the main drain cover(s). Various approved covers can be found under VGB Approved Drain Covers and Equalizer Covers listed at the following website: <http://charmeck.org/mecklenburg/county/HealthDepartment/EnvironmentalHealth/PublicSwimmingPools/Pages/default.aspx> or at the drain cover manufacturer’s website.
4. EQUALIZER COVERS – Enter the number of operable equalizer line covers, the manufacturer, model, lifespan expiration date and maximum flow for the equalizer covers. Various approved covers can be found under VGB Approved Drain Covers and Equalizer Covers listed at the following website: <http://charmeck.org/mecklenburg/county/HealthDepartment/EnvironmentalHealth/PublicSwimmingPools/Pages/default.aspx> or at the equalizer cover manufacturer’s website. If all equalizer lines are disabled or pool has no equalizer lines, please indicate and provide details on the form.
5. SAFETY VACUUM RELEASE SYSTEM (SVRS) – SVRS is required if dual drains are closer than 3 feet on center or pump has a single drain with a blockable cover or blockable sump. Enter the manufacturer of the safety vacuum release system (SVRS). If using another secondary method of preventing bather entrapment allowed in Rule .2539(b), please attach documentation.
6. VACUUM LINE – If vacuum line ports are present in the pool, please indicate the type of cover(s) on the form.

FORM COMPLETION – A separate Pool Drain Safety Compliance Data form must be completed and submitted for each individual pool at a facility including spas, wading pools, and other pools.

The Health Department understands that the required information and/or measurements may be beyond the scope of owners or operators. In those cases, it is recommended that you contact a Registered Design Professional (Professional Engineer or Licensed Architect) or a knowledgeable pool professional to assist you in completing the form.

