Pool and Spa Plan Check Submittal Checklist

Below are some common items that are typically missing or inadequately detailed and may delay the plan review and approval. This checklist is based on requirements contained in the California Health and Safety Code (Sections 116025 through 116068) and the California Code of Regulations, Title 22 (Chapter 20) and Title 24 (Chapter 31B). This checklist is not all-inclusive and is subject to change without notice. Refer to the appropriate state laws and regulations and CCEH Construction Guidelines for additional requirements and details. We provide pre-design consultation on a first come, first serve basis, Monday through Friday 9:00 a.m. to 12:00 p.m., 30 minutes maximum, no appointment needed.

1. **Sheet/page #**  
   **TURNOVER RATE (3124B) *Submit manufacturer specification sheet**
   A) __________ (LxWxDx7.48)_________ or (AreaxDx7.48)_________ = _______gal*Factor = _______gpm  
      Factor: Pool 360 minutes, Spa 30 minutes, Wading Pool 60 minutes
   B) __________ *Pump: Make________________ Model____________ HP_______@ 60 ft. of head = _________gpm
   C) __________ *Spa Booster: Make____________Model____________HP_______@ 40 ft. of head = _________gpm

2. **Sheet/page #**  
   **PIPE SIZES – Recirculation (3125B and 116064)**
   A) __________ Main Drains__________ inches  Skimmers__________ inches  Equalizer Lines__________ inches
   B) __________ Velocity ≤ 8 feet per second in suction lines (recommend 6 feet per second)
   C) __________ Return Lines__________ inches  Velocity ≤ 10 feet per second in return lines.
   D) __________ (Spa Booster) Drains__________ inches  Velocity ≤ 8 ft. per sec. in suction lines (recommend 6 ft. per sec.)
   E) __________ Wading Pool Drains__________ inches  Velocity ≤ 6 ft. per sec. for all main drain pipes when 100% of flow comes from main drain and any main drain is blocked.
   F) __________ Equipment Room Pipe sizes: ___________ inches
   G) __________ Spa aeration and/or jet system separate from filtration system.
   H) __________ Overflow pipe (if have) air gap if to sanitary sewer.

3. **Sheet/page #**  
   **FILTER REQUIREMENTS (3127B) *Submit manufacturer specification sheets**
   A) __________ *Make________________ Model________________ Type________________
   B) __________ ________ rated gpm (pump) ÷ factor = ________ square feet required
      Factors: Diatomaceous earth = 2 (2 ½ if ≥ 2000 sq.ft. pool continuous feeding of D.E.), High Rate Sand = 20 (recommend 15, especially if high use pool), Cartridge = .375
   C) __________ Filter requirements per code
   D) __________ Multiple filters: indicate that filters are isolated
   E) __________ Pressure drop 3 psi maximum
   F) __________ Air release
4. **Sheet/ page #**  
**DISINFECTANT FEEDER** (1 per filtration system) *Submit manufacturer specification sheets*

A) __________  
*Make______________ Model______________ Type______________ Approved  Type______________  
(Feed Rate at least 3 lbs. of chlorine/day/10,000 gallons)  
B) __________  
Interlocked with pump  
C) __________  
Feed line connected downstream of equipment  
D) __________  
Chemical containers  
E) __________  
Feed rate adjustable 25%-100%  
F) __________  
Feed rate accurate within 10%  
G) __________  
Does not also feed Cyanuric Acid

5. **Sheet/ page #**  
**SKIMMERS (31234B)** (Pools not over 5,000 sq. ft) Submit manufacturer spec. sheets  

A) __________  
__________ sq. ft. surface area ÷ 500 = __________ number of skimmers required  
(Additional skimmers may be required to obtain adequate skimming)  
B) __________  
Locations (prevailing wind considered)  
C) __________  
Check Valve  
D) __________  
Float Valve  
E) __________  
Weir (4 inches )  
F) __________  
Basket  
G) __________  
Split equalizer lines  
H) __________  
Equalizer grates 3 feet apart  
I) __________  
Uniform flow (Flow not exceed skimmer GPM rating)

6. **Sheet/page #**  
**INLETS (31334B)**

A) __________  
__________ GAL ÷ 10,000 = ________ + 1 = ________ inlets required  
(Additional inlets may be required to obtain uniform circulation)  
B) __________  
Inlet fittings adjustable (flow and direction)  
C) __________  
Uniform circulation and flow  
D) __________  
Pool inlet fittings round and smooth, protrude 1 ¼ inch maximum  
E) __________  
Inlet fittings over 18 inches below water (except spa or wading pools)  
F) __________  
Inlet fittings minimum 10 feet apart  
G) __________  
Fill line (permanent if ≥ 1,500 gals.)  
H) __________  
Approved source of water  
I) __________  
Approved Backflow Protection  
J) __________  
Auto-Fill Float Valve proposed  
K) __________  
If Auto-Fill float valve, pressure vacuum breaker  
L) __________  
Inlet fittings minimum 5 feet away from skimmers/main drains
7. **Sheet/page #**  

**GRATES** – Submit manufacturer specification sheets

A) _______  

GPM rating: ____________  

(Must be equal or greater than maximum flow rate through grate if entire flow is through one (1) grate)

B) _______  

Suction grate size: _______ inches x _______ inches (if round, diameter _______ inches)

C) _______  

Meeting ANSI/ASME A112.19.8-2007 standard

D) _______  

Spa drains clear of steps and bench

E) _______  

Main drains (at deepest point)

F) _______  

Bottom drains minimum 3 feet apart

G) _______  

Tamper proof

H) _______  

Slots/open ½ inch maximum wide

I) _______  

Hydrostatic device

J) _______  

Clearance, grate and pipe 2 inches or largest pipe diameter, whichever greater, unless specs are different

8. **Sheet/page #**  

**POOL CONSTRUCTION (3106B)**

A) _______  

Length: _______ feet  

Width: (15 feet minimum at main drain for swimming pools): _______ feet

B) _______  

Pool geometry

C) _______  

Shallow end depth: _______ feet break in slope depth  

(If applicable): _______ feet deep end depth: _______ feet

D) _______  

3 ½ feet maximum depth at shallow end (except special purpose pool)

E) _______  

Shallow slope (1 feet per 10 feet Maximum)

F) _______  

Color (white)

G) _______  

Pool finish material approved

H) _______  

Spa color white/ light pastel color

I) _______  

Pool surface free of unapproved projections or recessed areas

J) _______  

Tolerance (+/- 2 inches or +/- 1/8 inch for non-adjustable overflow system)

K) _______  

Lane lines (slip-resistant/12 inches maximum wide, flush)

L) _______  

Depth marking tile line, 4 inches wide, slip-resistant contrast color, flush, at 4 ½ feet depth  

(Not required if maximum depth 5 feet)

M) _______  

Rope anchors (flush) for safety rope at 4 ½ feet depth (if change in slope from shallow to deep water)

N) _______  

Decorative designs are prohibited if could be mistaken for a human

O) _______  

Radius at shallow end (1 feet maximum)

P) _______  

Spring line per code

Q) _______  

Main drain to deep end edge of pool (distance): _______ feet  

(Main drain to deep edge of pool (distance) meet code)

R) _______  

Spa bench and steps, outlines (1 to 2 inches wide, slip-resistant contrasting color, flush)

S) _______  

Depth markers and locations (only 2 needed in spa or wading pool, needed on deck if pool > 20 ft. wide)

T) _______  

Depth markers ≤ 25 feet apart

U) _______  

Deck depth markers slip-resistant/flush with deck

V) _______  

Depth markers contrasting color and size (3 inch minimum)
W) __________ Feet indicated for each depth markers
X) __________ Steps/Ladders: shallow end, deep end
   (over 4 ½ feet deep, over 30 feet wide need at each deep end not more than 100 feet apart)
Y) __________ Ladder clearance (3 to 5 inches)
Z) __________ Slip-resistant treads
AA) __________ Stairs treads/risers (all same dimensions., 12 inches minimum treads, 18 inches minimum tread for convex top steps, 12 inches maximum risers)
BB) __________ Spa stairs (9 inches maximum risers with 1 handrail, 12 inches maximum riser with 2 hand rails)
CC) __________ Spa stairs located on 4 feet side of deck
DD) __________ Handrail (at least over bottom step, ≥ 28 inches above deck, pool edge, and steps)
EE) __________ Spa bench (no projections or recessed areas except for spa bench if not over 24 inches underwater)
FF) __________ Clearance between rail and step (3 to 5 inches)
GG) __________ Recessed steps (tread 5 inches minimum, width 14 inches minimum)
HH) __________ Grabrails
II) __________ Electrical bonding of handrails/ladders, grabrails (as per building department requirements)
JJ) __________ Diving board(s)
KK) __________ Diving board requirements
LL) __________ Pool geometry requirements with diving board(s)

9. Sheet/page # DECK (3113B)
   A) __________ Minimum 4 feet wide (including behind diving boards, etc.)
   B) __________ Slip-resistant
   C) __________ Non-abrasive
   D) __________ Unobstructed
   E) __________ Spa at least 6 feet from pool
   F) __________ Drainage and ¼ inch per ft. min. slope (recommend 400 square feet max per drain)
   G) __________ Drains (recommend maximum 25 feet apart)
   H) __________ Artificial covering (not allowed)
   I) __________ Sealing of space behind coping
   J) __________ Unpaved areas at least 4 feet from spa
   K) __________ Hose bibs (all deck area within 75 feet of a hose bib with approved water source for each hose bib)
   L) __________ Vacuum Breaker
   M) __________ Safety of locations
   N) __________ Coping shape (1 to 2 inches overhang, 2 ½ inches maximum thickness)
   O) __________ Coping slip-resistant
   P) __________ Spa emergency shut-off switch

10. Sheet/page # SIGNS (3119B, 65539), AND SAFETY EQUIPMENT (3108B, 65529, 65539)
A) __________ Signs 4 inch letters (where required)
B) __________ Lifeguard
C) __________ NO LIFEGUARD sign (4 inch letters)
D) __________ Children under 14 years of age sign
E) __________ Artificial Respiration sign
F) __________ 911 #'s sign
G) __________ 2 NO DIVING SIGNS (shallow pool <6 feet deep, 4 inch letters)
H) __________ OCCUPANT LOAD (near entry, 4 inch letters)
I) __________ Occupancy Load (1 bather per 20 sq.ft. for pools) _______ (1.10 sq.ft. bather per for spas) _______
J) __________ Chlorine gas sign (4 inch letters, if applicable)
K) __________ Emergency Evacuation Sign
L) __________ Spa Caution Sign
M) __________ Labeled emergency spa shut-off switch
N) __________ Warning sign for pools without lighting (4 inch letters)
O) __________ Rescue pole / body hook attached to a pole at least 12 feet in length
P) __________ 17 inches minimum life-ring-rope
Q) __________ Rope for life-ring span maximum width of pool
R) __________ First aid kit (where required)

11. Sheet/page # FENCING AND GATES (3118B, Figures 31B-4 and 31B-5)
A) __________ 5 feet height minimum (recommend higher)
B) __________ Enclosure/gate elevations
C) __________ Gates self-closing and latching (including building)
D) __________ Lockable to pool users
E) __________ Double gates (1 locked closed-so swing gate can latch to it)
F) __________ Gates open out/away from pool area
G) __________ Can leave pool area without key
H) __________ Enclosure replacement/upgrade/repair (not without enclosure)
I) __________ Latch height, gates/diors/building. Doors/panic bars (3 ½ feet min. to center of latch)
J) __________ Bottom of enclosure ≤ 2 inches from finish grate (recommend over concrete or equal)
K) __________ Vertical bars (≤ 4 inches between bars)
L) __________ Horizontal bars (≥ 4 feet between bars)
M) __________ Landscaping plans
N) __________ 5 feet clear span (no trees, planters, climbable objects)
O) __________ Pool enclosure cannot be readily climbable by small children
P) __________ Private yard/off premises property should not be in 5 feet clear span
Q) __________ Chain link fence 1 ¾ inch maximum horizontally
R) __________ Doors, gates, operable windows of living quarter. Premises shall not be part of the pool enclosure.

12. Sheet/page # PUMPROOM-Submit manufacturer specifications sheet for all proposed equipment
A) __________ Location in relations to pools
B) __________ Approved floor slope to drain (1/4 inch per foot)
C) __________ Drain
D) __________ Timer
E) __________ Ventilation
F) __________ Hose Bib
G) __________ Gauges (influent and effluent)
H) __________ Flow meter size and location
I) __________ Vacuum Gauge (recommended)
J) __________ Valves identified
K) __________ Sight Glass
L) __________ Backwash to sanitary sewer by air gap
M) __________ Sanitary sewer backwash line size__________ backwash line size adequate
N) __________ Backwash sump proposed
O) __________ Cartridge filter cleaning facility to sanitary sewer
P) __________ Sump size (if applicable ___________)
Q) __________ Hose bib for cartridge filter cleaning area
R) __________ Vacuum Breaker (fill line/hose bibs)
S) __________ Hair and Lint strainer
T) __________ Heating (check):  ☐ Gas  ☐ Electric  ☐ Solar
U) __________ Backwash Valve
V) __________ Light
W) __________ Pool and spa circulation system must be separate
X) __________ Main drain and skimmer valves separate, labeled
Y) __________ Pipes labels and arrows
Z) __________ Accessible
AA) __________ Spa Booster separate from spa circulation
BB) __________ Test Kit (DPD, pH, CYA.)
CC) __________ Records (log)
DD) __________ Chlorine Gas
EE) __________ Cylinders Secured
FF) __________ Precaution Cap
GG) __________ Key
HH) __________ Scale
II) __________ Solution feed
JJ) __________ No backflow

13.  Sheet/page #   GAS CHLORINE (if applicable)
A) _________ Separate room
B) _________ Gas piping in chlorine room
C) _________ Interlock with pump
D) _________ Off during backwash
E) _________ Not below ground
F) _________ 1 hour Fire Resistant.
G) _________ Entry (to outdoors, not toward pool or deck)
H) _________ Ventilation (60x1 hour)
I) _________ Air intakes ≤ 6 inches of ceiling
J) _________ Fan and light switch (labeled)
K) _________ Exhaust taken at or near floor
L) _________ Ammonia
M) _________ Gas Mask
N) _________ Pool cleaning system (e.g., pool vacuum)

14. Sheet/page # BATHHOUSE FACILITIES (3115B) Submit samples of walls, floors and ceiling
A) _________ Bathhouse load (All pool area ÷ 15 ÷ 2): Male__________ Female__________
B) _________ Travel distance pool to farthest living unit ___________ feet.
C) _________ Number of Showers (1 per 50 bathers) ____________
D) _________ Lavatories and showers hot and cold water (110°F Maximum)
E) _________ Walls/ceilings (non-absorbent and cleanable)
F) _________ Floors slip-resistant
G) _________ 5 inches minimum integral cove base
H) _________ Floor drains
I) _________ Floor slope to drains (1/4 inch per foot minimum)
J) _________ Dressing facilities
K) _________ Number of male toilets (1 toilet & urinal per 75 males): # toilets __________ # urinals __________
L) _________ Number of female toilets (1 per 60 females): __________
M) _________ Number of lavatories (1 per 80 Male/Female): __________
N) _________ Soap, towel (or air blow) and toilet tissue dispensers
O) _________ Shower soap dispensers
P) _________ Shower walls/ceiling (non-absorbent/cleanable)
Q) _________ Shower floors slip-resistant
R) _________ Shower 5 inches minimum integral cove base
S) _________ Outdoor shower floor drains connected to sanitary sewer
T) _________ Shower floor slope to drains (1/4 inch per foot minimum)
U) _________ Restroom/dressing facility/shower ventilation plans

15. Sheet/page # GUARDED DRINKING FOUNTAIN (S) (3116B)
A) _________ (Not required if drinking water available in adjacent living units or building)
B) _________ Number of drinking fountains _________ (1 per 1st 250 bathers, + 1 additional per 200 or fraction thereof)

16. Sheet/page # LIGHTING (3114B)
A) _________ Underwater light (1/2 watt min. per square feet of pool surface area): _________ watts
B) _________ GFI if > 15V
C) _________ Underwater lights ≤ 150V
D) _________ Pool light(s) ≥ 18 inches underwater (unless approved ≥ 4 inches underwater)
E) _________ Adequate deck lighting

17. Sheet/page # PERIMETER OVERFLOW SYSTEM (3134B) Required for pools over 5000 sq. feet
A) _________ Channel shape and size
B) _________ Channel drain
C) _________ Surge tank/surge control (automatic make-up water)
D) _________ Gallons in surge tank _________ Gallons in gutter _________
E) _________ Surge storage total gallons: _________ (min. 1 gallon per square feet of pool water surface area)

18. Sheet/page # SOLAR HEATING - Submit manufacturer specifications sheets
A) _________ Location of collectors
B) _________ Pipe sizes correct
C) _________ No filter by-pass
D) _________ Turnover maintained
E) _________ Booster pump (if applicable)
F) _________ Booster pump HP _________(if applicable)

19. Sheet/page # SPA WATER TEMPERATURE
A) _________ 104°F maximum

20. Sheet/page # CLEANING SYSTEM
A) _________ Pool Vacuum (separate vacuum line is not allowed)

21. Sheet/page # INDOOR POOL VENTILATION PLANS
A) _________ Windows/mechanical ventilation: according to acceptable engineering principles

For a complete description of applicable requirements, please refer to Environmental Health Division Construction Guidelines and Codes for Pool and Spa. You can download a copy at www.cchealth.org/eh/ or call (925) 692-2500.