



**Curtis Hopper, R.S.
Administrator**

Gaston County Environmental Health

991 West Hudson Boulevard • Gastonia, North Carolina 28052
Phone (704) 853-5200 • Fax (704) 853-5231 • www.gastonpublichealth.org

APPLICATION FOR SWIMMING POOL PLAN REVIEW

_____ A plan review fee of \$165.00 per pool shall be submitted with this application along with two sets of plans which shall include the following: **Plans shall be drawn to an acceptable architectural scale.**

Check Items:

_____ Site Plan, including pool, deck and any other appurtenant building,

_____ Plan and sectional view dimensions of both the pool and the area enclosed by the barrier fence,

_____ Plans and layouts for the bathhouse, the equipment room, and the chemical storage room,

_____ Specifications of all treatment equipment used and their layout in the equipment room, include equipment cut sheets,

_____ One piping schematic showing piping, pipe size, inlets, main drains, skimmers, gutter outlets, vacuum fitting and all other appurtenances connected to the pool piping system,

_____ Specifications for the water supply and wastewater disposal systems. This would include aspects such as well location, sewage disposal system location, and backwash water disposal where applicable,

_____ A fencing detail, drawn to scale,

_____ A lighting schedule if pool is open for night swimming,

Note: Plans shall be drawn to not less than one-eighth inch to the foot scale.

Name of Proposed Facility _____

Directions or Vicinity Map of Proposed Facility _____

Type of Pool: Swim Pool _____ Wading Pool _____ SPA _____ Other _____

Agency/Person Submitting Plans:

Name: _____

Mailing Address: _____

Phone: _____

Builder of Proposed Facility:

Name: _____

Mailing Address: _____

Phone: _____

Owner of Proposed Facility:

Name: _____

Mailing Address: _____

Phone: _____

Pool Builders General Contractors License # _____