



Inspectional Services Department

POOL PLAN REVIEW

Public ___ Semi-Public ___ Indoor ___ Outdoor ___

Swimming Pool ___ Wading Pool ___ Special Purpose Pool ___ Other _____ New () Remodeled ()

Name of Facility _____ Address _____

Owner _____ Phone _____

Home Address _____

Construction Start Date _____ Pool Opening Date _____

The pool supervisor of all public and semi-public swimming pools shall have successfully completed a course in the safe and effective operations and maintenance of swimming pools evidenced by certification as a Pool Operator from the YMCA, the National Swimming Pool Foundation, or from any other organization providing equivalent training, subject to the approval of the Department. Certification submitted. Yes () No ()

Plans submitted under stamp and signature of **Mass. Reg. Prof. Engineer or architect.** Yes () No ()

Width of Pool _____ Length of Pool _____ Depth of Pool _____ To _____

Vol. of Pool in Gal. _____ Total Sq. Ft. of Pool _____ Total Cu. Ft. of Pool _____

435.06 Turnover Rate (GPM) _____ Design Turnover Rate (in hours) _____

- A. Swimming Pools - Once every eight (8) hours – ideal 6 hours or less
- B. Wading Pools - Once every four (4) hours
- C. Special Purpose Pools - Once every half (1/2) hour
- D. Water Slide Flumes – Once every hour

435.06 Type of Filtration System _____

Square Footage of Filter Surface Area _____

- A. Pressure or gravity sand - 3 gal. per min. per sq. ft.
- B. High Rate Sand - 15 gal. per min. per sq. ft.
- C. Diatomaceous Earth - 1.5 - 2.0 gal. per min. per sq. ft.
- D. Cartridge - .375 gal. per min. per sq. ft.

Automatic chlorinators provided and shall have a feed rate of at least three (3) pounds of chlorine per 10,000 gallons per 24 hours for outdoor pools and at least one (1) pound of chlorine per 15,000 gallons per 24 hours for all indoor pools.

Yes () No ()

The equipment of the recirculation and purification system shall include:

- A. A filtration system Yes () No ()
- B. Recirculation pumps Yes () No ()
- C. Hair and lint strainers Yes () No ()
- D. Provision for chemical feed Yes () No ()
- E. Provision for bactericidal treatment Yes () No ()
- F. Filter effluent flowmeter or meters Yes () No ()
- G. Balancing or float-control tank or above-rim fill spout Yes () No ()
- H. DPD Test kit (s) will be available to meet the requirements of 105 CMR 435.29 and must be capable of distinguishing free residual chlorine and combined chlorine Yes () No ()
- I. All other equipment necessary to make the particular treatment process complete and efficiently operable Yes () No ()

435.27 Non Swimming area square footage _____ (5ft. or less)

Swimming area square footage _____ (over 5 ft.)

Diving area _____ (Reserve 300 sq. ft. around each diving board)

Maximum Bather Load _____

15 Sq. Ft. Non-Swimming area per person 20 Sq. Ft. Swimming area per person 10 Sq. Ft. Special Purpose Pool

435.08 How many **submerged inlets** for uniform circulation _____

The spacing of the return inlets shall be not greater than 20 feet on center. In no case there be less than two such inlets per 600 square feet, or fraction thereof. The total velocity through the inlets shall not exceed 15 feet per second. Yes () No ()

Does the pool have a balancing or float control tank? Yes () No ()

Does the pool have an **over the rim fill spout** located not to create a hazard or automatic **water make up fill system**?

Yes () No ()

Outlet provided at deepest point of pool Yes () No () Two (2) required for pools more than 30 feet wide Yes () No ()

Outlet anti-vortex in design or outlet opening with non-removable grate four (4) times the area of the discharge pipe. **Outlet cover can only be removed with use of tools.** Yes () No ()

A minimum of two suction outlets shall be provided for each pump in the suction outlet system, separated by a minimum of three feet or located on two different planes. Yes () No ()

All special purpose and wading pool shall, by July 1, 1998 install an emergency shut off pump switch, in an accessible location, prominently marked and within plain sight at the special purpose or wading pool. Yes () No ()

Outlet piping design capacity equal to the recirculation pump capacity Yes () No () Size _____ Velocity _____

435.10 Type of Skimming facilities _____

Skimmers or overflow system capable of recirculating 50% of the pool water from the top surface of the pool? Yes () No ()

In wall skimmer(s) provided for each 500 sq. ft. of pool surface area.

In wall skimmer(s) provided for each 100 sq. ft. of special purpose pool surface area. Yes () No ()

In wall skimmer capable of 20 gallons per minute per lineal foot of weir and a flow through rate of at least 30 gallons per minute. Yes () No ()

435.03 Hose connections provided for flushing down bathhouses, dressing rooms and pool decks. Yes () No ()

Adequate storage space provided for janitorial and pool equipment. Yes () No ()

Adequate lighting provided in all parts of bathhouse, dressing rooms, toilets and pool room(s). Yes () No ()

Adequate ventilation provided for room(s) housing indoor swimming pools, bathhouses, dressing rooms, shower rooms, and toilet. Yes () No ()

Acoustical properties of rooms housing indoor swimming pools designed with materials to reduce reverberation of sound.

Yes () No ()

Adequate enclosure provided to prevent animals and unauthorized persons from entering **outdoor** pool area (a six (6) foot high fence in accordance with MGL C.140 & 206). Yes () No ()

Adequate enclosure provided to prevent unauthorized persons from entering **indoor** pool area? Yes () No ()

Sanitary drinking water facilities provided. Yes () No ()

435.05 No projections except ladders and grab rails permitted from any pool wall or floor surface. Yes () No ()

The finish of pool walls and floors shall be of light color. Yes () No ()

435.11 Pool slopes shall not exceed one (1) foot vertical in 12 feet horizontal. Yes () No ()

Maximum water depth of special purpose pools shall be four (4) feet measured from the waterline. Yes () No ()

Maximum depth of any seat or bench in a special purpose pool shall be two (2) feet. Yes () No ()

The walls of pools used for competitive swimming shall remain vertical for a minimum water depth of 3 feet six (6) inches.

Yes () No ()

The maximum radius of coving shall be twelve (12) inches at depths from three (3) feet to four (4) feet six (6) inches.

Yes () No ()

At depths greater than four feet six inches, the radius of coving joining the wall and floor at any point shall be equal to not more than the depth of the pool at that point minus two feet six inches. Yes () No ()

435.12 Water depth markings required on the pool deck and on the vertical pool walls at one-foot depth intervals in the shallow portion of the pool and then at appropriate places of not more than 25 feet intervals around the deep portion of the pool. Yes () No ()

A polyethylene line with floats shall separate the Non-swimming area from deeper water. Yes () No ()

All swimming pools constructed or drained after the effective date of these regulations shall have the boundary line between the shallow and deep areas marked with a four-inch stripe of contrasting color on the floor and walls of the pool. Ledges and step edges shall also be marked with a four-inch stripe of contrasting color. Yes () No ()

435.13 Walkways shall be constructed of slip resistant materials continuous around the pool with a minimum width of four (4) feet sloped ¼ inch per foot toward adequate drains. Yes () No ()

435.14 There shall be a minimum of two (2) ladders or step holes and one additional ladder or step holes for each 75 feet of swimming pool perimeter with handrails to enter or exit the pool. Yes () No ()

435.15 Diving boards shall be rigidly constructed, properly anchored and covered with a Non-slip material. Yes () No ()

No diving board or platform more than ten feet above the pool water level shall be permitted for general public use in any public swimming pool. Yes () No ()

At least thirteen feet of free and unobstructed headroom, eight feet behind and to each side, and sixteen feet ahead of the front of the diving board shall be provided. Yes () No ()

One meter diving boards or platforms shall have at least 30 inch guardrails that extend to the edge of the pool wall.
Yes () No ()

Diving boards or platforms higher than one meter shall have 36 inch guardrails that extend to the edge of the pool.
Yes () No ()

The minimum water depth for deck type diving boards shall be 8 feet 6 inches. Yes () No ()

Verify diving bowl specifications in appendix B, diagram II. Yes () No ()

The minimum water depth for one (1) meter boards shall be nine (9) feet. Yes () No ()

Verify diving bowl specifications in appendix B, diagram I. Yes () No ()

The minimum water depth for three (3) meter boards shall be 11 feet 6 inches. Yes () No ()

Verify diving bowl specifications in appendix B, diagram I. Yes () No ()

435.26 Pool waste and backwash water properly disposed of. Yes () No ()
Diatomaceous earth filter backwash water must be discharged through a separation tank. Yes () No ()

435.33 A thermostatic control for water temperature shall be provided for special purpose pools and only accessible to the pool operator. Yes () No ()

PUBLIC SWIMMING POOL REQUIREMENTS

435.03 Separate dressing and sanitary facilities for each sex provided. Yes () No ()

Bathers shall be so routed that the crossing of street shoes and wet barefoot traffic is kept to a minimum. Yes () No ()

Showers provided with hot and cold running water (one (1) for each 40 bathers). Yes () No ()

Toilets provided for each sex (one (1) for each 40 bathers; for males urinals may be substituted for one third (1/3) of the required number). Yes () No ()

Washbasins provided adjacent to toilets (one (1) for each 60 bathers). Yes () No ()

Designated room provided and equipped for emergency care of sick or injured bathers (cot, blanket, and first aid kit).

Yes () No ()

Comments/Special Requirements:

STATEMENT: I certify that the above information is correct and understand that if any changes are made in the above information without permission from the Division of Health Inspections may nullify this approval.

Signature: _____ Title _____

Preliminary Review By _____ Date _____

Title _____

Final Approval By _____ Date _____

Title _____



Inspectional Services Department

SWIMMING POOL AFFIDAVIT

435.02: Plan Approval (1) No person shall construct or install a swimming, wading or special purpose pool, or expand, remodel or otherwise make any change which may affect the compliance of an existing swimming, wading or special purpose pool with the requirements of 105 CMR 435.00 until the plans and specifications for the construction or change, under the stamp and signature of a Massachusetts Registered Professional Engineer or Registered Architect, have been approved in writing by the Board of Health. Nothing in 105 CMR 435.00 shall affect the authority of any person acting under appropriate sections of 780 CMR (The Massachusetts State Building Code), 527 CMR 12.00 (1996 Massachusetts Electrical Code (Amendments) and 248 CMR (Uniform State Plumbing Code and the Massachusetts Fuel Gas Code) or applicable local ordinance or regulation. In addition to 105CMR435 & Building Codes- All construction, installation, and maintenance of pools must be in accordance with additional regulations and guidelines:

[248 CMR: BOARD OF STATE EXAMINERS OF PLUMBERS AND GAS FITTERS 248 CMR 10.00: UNIFORM STATE PLUMBING CODE](#)

[527 CMR 12: Massachusetts Electrical Code Amendments](#)

[527 CMR: Board of Fire Prevention Regulations](#)

[780 CMR Massachusetts State Building](#)

[Accessible Swimming Pools and Spas](#)

[ADA and ABA Accessibility Guidelines for Buildings and Facilities](#)

[Architectural Access Board - 521 CMR 19.00: Recreational Facilities](#)

I attest to the approval of pool plans meeting all regulatory requirements of 105 CMR 435.000, all applicable building, electrical, plumbing codes as well as other applicable regulations and local ordinances. In addition, all Federal requirements for VGB shall be verified for full compliance.

Pool D/B/A _____ **Permit #** _____

Pool Address _____

Print Name and Title: _____

Signature: _____ **Date:** _____

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