

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.

1. Licensing Information:

This business (check one):

- is new and has never been licensed.
 is presently was previously licensed by the Health Inspection Program (HIP). If so, provide HIP License ESTID# _____

2. Business Information:

Please check one: Corporation/LLC Individual Partnership Association Other

Corporation/LLC, Individual, Partnership, Association or Other Name: _____

Owner(s) Name: _____

Owner(s) Mailing Address: _____

My business corporation is in good standing with the Secretary of State and all State Licensing Boards. Yes No

3. Former Owner's Information, if applicable:

Former Owner's Name: _____ Former Business Name: _____

4. Business Proposal:

Check all boxes that apply: Are you proposing to change ownership increase use

PLEASE SUBMIT THE FOLLOWING WITH THIS APPLICATION

Newly constructed, reconstructed, altered pools and spas or those pools and spas that have been unlicensed within the past 5 years: You must include the Registration Form (page 4) and Appendix C (page 7) with your application in order to obtain your public pool/spa license. In addition, please complete and submit the appropriate checklist: Pools (DWP0293), Spas (DWP0295), Aquatic Recreational Facility (DWP0297); Above Ground or Onground Pool (DWP0296) must be completed, signed, and stamped by a Maine Licensed Professional Engineer (P.E.).

Existing and licensed pools and spas that are not newly constructed, reconstructed, or altered:
Please fill out only pages 1, 2, 3 and 7 (7 only if on private septic) of this application and submit with the license fee payment to our office.

Please enter the number of pools you have below and submit the appropriate fee payment with a copy of your valid Certified Pool Operator Certificate (see Appendix A for courses).

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 or Spa	\$70.00
Additional Pools or Spas	\$35.00 each
MISCELLANEOUS FEES	
Reprint License	\$25.00
Late Renewal within 30 days of license expiration date	\$25.00
Late Renewal more than 30 days after expiration date	\$100.00 for 1st offense + \$25.00 for first 30 days
Additional Inspection	\$100.00
Insufficient Funds	\$25.00
Nonprofit – No license required if fewer than 12 events/year	\$0.00

I, _____, Owner/Operator of the business, hereby state that the
PLEASE PRINT NAME CLEARLY

Information in this application is accurate to the best of my knowledge. I further stipulate that I am aware that deliberate falsification of the information herein is sufficient cause for denial of a license for public pool or spa operation. The Department’s discovery of deliberate falsification of information on this application after a license is issued may subject to penalties, fines and other sanctions as authorized by licensing statutes and rules, as well as any other penalties, fines and sanctions provided by law.

Applicant’s Signature _____ Date of Signature _____

Make check payable to: Treasurer, State of Maine, and mail to:

**HEALTH INSPECTION PROGRAM
 286 WATER ST 3RD FL
 AUGUSTA, ME 04333**

Public Swimming Pool and Spa Registration Instructions

When submitting an application for a public swimming pool & spa license, due to change of ownership, where the public pool or spa previously operated (i.e. not newly constructed, reconstructed or altered) and is previously licensed within the last 5 years with the Department, the applicant and/or designer must submit 1, 5, 6 and 7 (7 only if on private septic) below, in order for the Maine CDC Health Inspection Program to review a complete application and issue a license:

Submit the following at least 30 days in advance of planned operation date of a public pool or spa*:

- (1) A completed public pool/spa application;
- (2) A Maine Department of Health and Human Services Swimming Pool Registration Form;
- (3) Applicable New Pool Design Checklist (Pools, Spas, Recreation Facility, other);
- (4) Plan(s) of the pool showing depths, area, piping, and safety features, demonstrating compliance 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, 10-144 CMR Ch.202 (See Appendix B);
- (5) 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;
- (6) Plans and manufacturer's specifications for pumps, filtering, and sanitizing equipment including all interconnecting piping and control valves; and
- (7) Payment of appropriate license fee amount, for each public pool or spa seeking licensure.

Within 15 Days of Planned Operation:

Receive a pre-operational inspection in order for the Department to conduct a timely review of the inspection findings and approve the pool or spa for licensure.

Upon receipt of all documentation listed above, the Department will review your request. Please remember to allow 30 days for review.

***The Department is authorized to require additional information, in accordance with Section 3 (C)(3) of the Maine Rules Relating to Public Pools and Spas. Therefore, for any newly constructed, reconstructed or altered public pool or spa, or for any existing public pool or spa without a registration or unlicensed within the past 5 years with the Department, the applicant must submit a Maine Professional Engineer (PE) certification and signature that public pool or spa plans and specifications meet ANSI standards described in Section 2(B)(2)-(6) of Maine's Rules Relating to Public Pools and Spas (10-144 CMR Ch 202), within the Pool Registration Form. This requirement is accomplished by having a Maine P.E. complete, sign, and stamp the aforementioned checklist for the type of pool being applied for.**

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 C.
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: _____

- This newly constructed, reconstructed or altered pool or existing pool without previous record of registration or unlicensed within the past 5 years, 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 P.E., [Include the appropriate checklist Pool DWP0293, Aboveground or Onground Pool DWP0296, Aquatic Recreational Facility Pool DWP0297], completed and signed by a Maine Licensed P.E.]
- This commercially available SPA/Hot Tub includes certification from the manufacturer or supplier that it meets the minimum standards for public spa design and operation set forth by the American National Standard for Public Spas (ANSI/NSPI-2 1999), as amended. (Please provide certification) If certification to ANSI/NSP-2 1999 cannot be provided by the manufacturer or supplier, the applicant must hire a licensed Maine P.E. to complete the Public SPA Checklist (DWP0295).

Appendix A

Approved Certified Pool Operator (CPO) courses

Pool and Hot Tub Alliance

<https://www.phta.org/>

Pool Operation Management

68 Edwards Road

Brick, NJ 08723

Phone: 732-451-1040

Toll Free: 800-922-0530

E-mail : POM4INFO@aol.com, info@pooloperationmanagement.com

Website: www.pooloperationmanagement.com

Nationwide Aquatic Consulting

Robert Freligh

P.O. Box 695

Chestertown, NY 12817

E-mail: nac4h2o@aol.com

Phone: 888-833-5770

Fax: 781-581-3594

Website: www.nac4h2o.com

Pool and Spa RX

Bob Richards

Email: poolandsparx@gmail.com

Phone: 518-899-1117

Website: <http://poolandsparx.com/>

Clear Advantage LLC

Edward Price

P.O. Box 176

Cornish ME 04020

Email: ed@clearadvantage.me

Phone: 207-232-2891

Appendix B

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, planation, 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.

*Per the Public Pool/Spa Rules, class C pools include pools intended for use by paid guests and patrons of licensed lodging establishments and clints of childcare facilities.

Appendix C Pool/Spas
Onsite Wastewater Disposal System - Local Review and Verification Form

This form is to be used by Health Inspection Program public pool/spa 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. Before any pool water is disposed of in a public sewer system, the operator must obtain permission from the receiving public sewer system. Before any pool water is disposed of on any surface or into any body of water, the operator must obtain permission from the Department of Environmental Protection (DEP).

Please include this completed form with your license application.

To be completed by the Owner/Applicant for 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 _____