California Department of Public Health Compliance Form

Anti-Entrapment Devices and Systems for Public Pools and Spas

Health and Safety Code Sections 116064.1 and 116064.2

INSTRUCTIONS FOR COMPLETING THE COMPLIANCE FORM

- Use one form for each pump or multiple pumps under the same drain cover. For example, a spa with a
 recirculation pump and a jet pump each with their own set of split drains that terminate under a different drain
 cover will require two forms. However, two pumps with split drains that terminate under the same drain cover will
 require only one form.
- · All sections of the form must be completed.
- · Print legibly.
- Return the completed form to your local Environmental Health Department.

I. Site Information

- A. Facility name name of facility or DBA (e.g. Oak Glen HOA, Palms Apartments).
- B. Pool Identification description of the pool which will identify it when there is more than one pool on the property.
- C. Facility Address address, city, state, and zip code of the facility where the pool or pools are located.
- D. Owner's name owner, owner's representative, or corporation name.
- E. Owner's address address, city; state, zip, and telephone number of the owner or owner's representative.
- F. Indicate if the pool was constructed on or after January 1, 2010.

II. Pump Information

A. Identify the type of pump that is connected to the drain. If two pumps terminate under one set of split drains (e.g. one side of a split suction drain is used for both a recirculation pump and a jet pump), describe both pumps. For each pump, provide the make, model number, and horsepower. Remember, complete a separate compliance form if the additional pump is connected to a different drain cover.

III. Main Drain (Includes All Suction Outlets Except Skimmer Equalizer Lines)

- A. Provide the manufacturer; make and model; and the date the drain cover was installed.
- B. Provide the floor and wall flow rating in gallons per minute for the drain cover. Note: If there are two different drain covers (e.g. one on the wall and one on the floor), there is space on the compliance form to complete drain cover information for each drain.
- C. Indicate the size of the pipe terminating at the main drain or jet suction.
- D. Check a box to indicate the configuration of the drain.
 - 1. **Split Main Drains** means there are two drains that are hydraulically balanced and symmetrically plumbed and are separated by a distance of at least three feet in any dimension between the suction outlets.
 - 2. **Single Drain Unblockable** means there is one drain approved to be unblockable so that a human body cannot sufficiently block it to create a suction hazard.
 - 3. **Single Drain Not Unblockable** means there is a single drain which can be sufficiently blocked by a human body to create a suction hazard. This type of drain must be protected by an approved safety vacuum release system or other equally or more effective system. Provide the type of device installed, manufacturer, model, and indicate which type of performance standard is marked on the device (ASTM F2387 or ASME/ANSI standard A112.19.17).

IV. Contractor/Engineer Certification Section

- A. Enter a valid California State Contractor's license number.
- B. Enter the Contractor's license classification.
- C. Or enter the California State Professional Engineer's license number, if applicable.
- D. Enter the Contractor's- /- Engineer's name and the company they are working for.
- E. Enter the company address, city, state, zip code, telephone number, cell phone number, FAX number, and email for the Contractor- /- Engineer.
- F. Print the name of the Contractor/Engineer.
- G. The Contractor or Engineer must sign the form.
- H. Enter the date the form was signed.

LEGISLATIVE UPDATE April 27, 2010

Assembly Bill 1020 Public Pools Anti-Entrapment Devices and Systems

The passage of Assembly Bill 1020 (AB1020) in October of 2009 requires <u>existing</u> public swimming pools to be equipped with anti-entrapment devices or system <u>and</u> for pools with single main drain that is blockable to be equipped with specified devices or systems that are designed to prevent physical entrapment by pool drains. <u>Newly</u> constructed pools are required to have at least two main drains per pump that are hydraulically balanced and symmetrically plumbed through one or more "T" fittings. These devices or systems must conform to ASME/ANSI performance standard A112.19.8, as in effect December 31, 2009, or any applicable ASME/ANSI performance standard that has been adopted by the California Department of Public Health (CDPH).

The following devices are designed to prevent physical entrapment by pool drains:

- 1. Safety Vacuum Release System
- 2. Suction-limiting cent system with a tamper-resistant atmospheric opening
- 3. Gravity drainage system
- 4. Automatic pump shut-off system

Public swimming pools constructed prior to January 1, 2010 must be retrofitted by no later than **July 1, 2010** and complete and submit the state certification form to Contra Costa Environmental Health **within 30 days** of completion of retrofit. Pools that were retrofitted between December 19, 2007 and January 1, 2010 and complied with the Virginia Graeme Baker Pool and Spa Safety Act must complete the state certification form and submit to Contra Costa Environmental Health prior to **September 30, 2010**.

Pools retrofitted after January 1, 2010 shall also submit the county issued, Remodel Checklist for Assembly Bill 1020 Review Form, in addition to the state certification compliance form.

Both forms are included in this letter and can be downloaded from the Contra Costa Environmental Health Division website (<u>www.cchealth.org</u>)

Remittance of the **Remodel Checklist for Assembly Bill 1020 Review Form** is subject to a site evaluation fee of \$193.00, required for pools retrofitted after January 1, 2010. An inspection of the facility may be required to verify accuracy of the submitted documentation.

There is no grandfather provision on public pools for exemption from compliance with both the Federal and State law requirements.

An individual proposing to install any other system that is deemed, in accordance with federal law to be equally effective or more effective than the systems described in sections 1 through 4 above, at preventing or eliminating the risk of injury or death associated with pool drainage systems, or otherwise construct, reconstruct, or alter a public pool- shall submit legible plans and specifications to Contra Costa Environmental Health for review and written approval prior to commencing the work. Necessary approvals shall also be obtained from the local building authority.

ONLY QUALIFIED CONTRACTORS SHALL COMPLETE THE WORK

All persons retrofitting, replastering, resurfacing, renovating, or re-plumbing an existing public pool must possess a valid California C53-Pool Builder or an "A" - General Engineering contractor's license. A C35-Lath/Plaster Contractor is only licensed to replaster a pool. Plumbing modifications which may include splitting drains or installing an unblockable drain will require a C53-Pool Builder, C36-Plumbing, or an "A"-General Engineering contractor's license. Fees will be required for pool site reviews, building plan reviews and construction inspections where applicable.

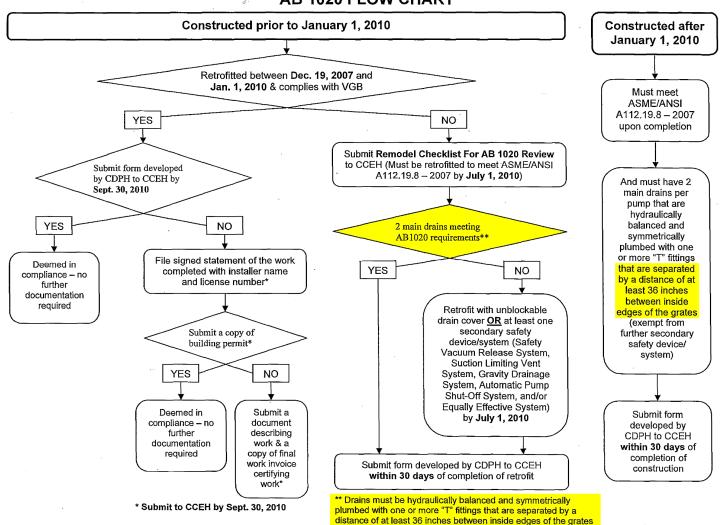
CALIFORNIA DEPARTMENT OF PUBLIC HEALTH SURCHARGE

As provided by AB 1020, an annual CDPH surcharge of \$6.00 will be applied to each public swimming pool in California. EHD is required to collect this State surcharge with the annual permit fees for public swimming pools from January 1, 2010 through January 1, 2014. The surcharge is transmitted to the State Controller and deposited into the Recreational Health Fund.

The Environmental Health Division point of contact, Lino Ancheta, EHS II, will respond to questions. He can be contacted at (925) 692-2523 between hours of 7:30 a.m. to 9:00 a.m. Mondays through Fridays.

Refer to the AB1020 flow chart attachment for guidance.

AB 1020 FLOW CHART



APPROVED BY:	California Department of Public Health Compliance Form	OFFICE USE ONLY
DATE:	Anti-Entrapment Devices and Systems for Public Pools and Spas	
	Health and Safety Code	

NOTE: Use one form for <u>each pump</u> or <u>multiple pumps under the same drain cover</u>.

ALL SECTIONS OF THIS FORM MUST BE COMPLETED.

Sections 116064.1 and 116064.2

This form is to be used to verify compliance with modifications pursuant to the new Health and Safety Code sections 116064.1 and 116064.2. Under Section 116064.2 (a) of the Health and Safety Code, effective January 1, 2010, the owner of a public swimming pool shall file this form within 30 days following the completion of construction or installation of anti-entrapment devices or systems in swimming pools. Contact your local Environmental Health Department and Building Department for any necessary plan approval and permits prior to construction or remodel.

Site Information	noval and permits prior to construction of remi		
	Pool Identification (if more than 1 pool/spa at site):		
-	City:St:Zip:		
•	Owner's Phone Number:		
Owners Address			
Pool constructed on or after January 1, 2010?:			
Pump Information	The state of the s		
☐ Recirculation Pump	☐ Jet / Booster Pump		
Make/Model		H.P	
□ Other Pump:			
Make/Model	☐ Feature Pump ☐ H.P Make/Model	H.P	
Main Drain (Includes All Suction Outlets Exce	ept Skimmer Equalizer Lines)	·	
Manufacturer of approved drain cover:	Model Number:	Install date	
GPM rating: Floor Wall	Installed on □ Floor □ Wall		
Manufacturer of approved drain cover:	Model Number:	Install date	
GPM rating: Floor Wall	Installed on □ Floor □ Wall Main drain/J	et suction pipe size is inches.	
Check One:			
	reen covers, hydraulically balanced and symmetrically p	The state of the s	
□ Single drain – Unblockable (size and s	hape that a human body cannot sufficiently block to crea	ate a suction entrapment)	
	f the following secondary devices required: safety vacua		
	pump shut-off system, or other equally or more effective		
	Type of secondary device installed: Install date Manufacturer of approved device: Model/Part Number:		
- , ,	wing performance standard markings: ☐ ATSM F2387		
	O TO COMPLY WITH MANUFACTURER'S INSTALLATIO ontractor license # with classificat		
Professional Engineer license #	with qualified experience working on public swim	ming people and that the information	
	dge. I understand that if I improperly certify this informa		
	ing authority in accordance with California Health & Safe		
	· · · · · · · · · · · · · · · · · · ·		
Contractor/Engineer Name:	tor/Engineer Name: Company Name:		
Company Address:			
City:	State:	Zip Code:	
Contractor/Engineer Phone Number:	Cell Phone Number:		
Contractor/Engineer FAX Number:	Email:	Email:	
·		•	
Contractor / Engineer name (PRINT)	Contractor / Engineer name (SIGNATU	RE) Date	
For a complete text of the law, visit: http://info.	sen.ca.gov/pub/09-10/bill/asm/ab_1001-1050/ab_102	0_bill_20091011_chaptered.pdf	