City of Rockwall She cNaw Thorizon	CITY OF ROCKWALL PUBLIC SWIMMING POOL & SPA OPERATING PERMIT	Send paperwork & payment to: City of Rockwall NIS DEPT. 385 S. Goliad St. Rockwall, TX 75087
POOL FACILITY NAME:		
POOL LOCATION		
PHONE#	EMAIL ADDRESS:	
FUTURE INVOICE MAILING ADDR	ESS:	
PROPERTY MANAGEMENT COMP	ANY:	
	CONTACT EMAIL:	
POOL COMPANY:		
POOL COMPANY PH#	POOL COMPANY EMAIL:	
REGISTERED CPO NAME:	CERTIFICATION #	
	*PLEASE PROVIDE COPY OF CERTIFICATION *	
Does Pool have a SVRS/SVRD atta	ched to pump? If yes NO	2018년 2019년 1919년 1918년 191 1919년 1919년 191 1919년 1919년 191
If yes, please proved operation c	onfirmation documentation	
POOL INFORMATIC	POOL FEES	
Number of Pools: 1 2 3 M		225.00 each Annually
Number of Spas: 1 2 3 M		25.00 each Annually
	Re-Inspection Fee	50.00 As needed
	Late Fee	30.00 As needed
	with model number, AMSE/ANSI certification confirmation ch Round waterway Covers	number, installation and expiration
SCOPE OF PERMIT: To control and reg within the City: to provide for the issu minimized. Applicants Signature	ulate the design, construction, operation, and maintenance of ance of operating permits and to provide penalties and remed Date:	all public swimming pools, spas & PWIF's ies so that health and safety hazards may be
Approved:		

(Neighborhood Improvement Services Representative)



Property Name:	Number of Permitted Pools/Spas
Property Address:	Date of Inspection(s):

SWIMMING POOL/SPA ELECTRICAL REQUIREMENT CERTIFICTION

Please initial each of the following items to certify that each is in proper working condition at each pool or spa as required by the City of Rockwall Pool Code. If an item is not applicable to the pool/spa, please enter "N/A".

- ____ Each electrical outlet within the enclosure and in a dressing or toilet facility is GFCI protected.
- Each electrical line to an underwater light if GFCI protected (must be located in the circuit breaker at the breaker box for the light or in an outlet through which the power for the light passes.
- If the switch that serves lights or equipment (other than pumps and underwater lights) is between 5 and 10 feet from the pool/spa wall, each electrical line to the switch must be grounded and have a GFCI located either: 1) in the circuit breaker for the light; or 2) in the equipment circuit that powers the switch at the breaker box; or 3) in an outlet through which the power for the switch passes.
- _____ All GFCI's and circuit breakers comply with 2020 NEC requirements.
- ____ Electrical equipment is grounded according to ANSI/UL 1563-2020 and the 2020 NEC.
- Electrical disconnecting means is accessible for service personnel, located within sight of the pool/spa equipment, and located farther than 5 feet from the inside pool/spa wall as required by the 2020 NEC. each disconnecting means must disconnect all underground conductors to the equipment if serves.
- Electrical equipment (including switches, outlets deck lights, pumps, and other electrical equipment) are located farther than 10 feet from the inside pool/spa wall unless:
 - a) The electrical equipment is at least 5feet from the pool/spa wall and is separated by a fence, wall or other permanent barrier at least 4 feet high:
 - b) The electrical equipment is at least 5 feet from the wall of the pool/spa and;
 - a. Consists of only one outlet for an electrical line that is grounded, has a GFCI, and has a locking mechanism covering the outlet;
 - b. Consists of one or more switches serving electrical lines that are grounded and that have GFCI protection that is located in the circuit breaker for the equipment at the breaker box or in an outlet through which the power for the equipment passes or;
 - c. Consists of an electrical device other than the outlet or switch and complies with applicable NEC requirements at the time of installation.

I hereby certify that I am a certified Electrician and am qualified to make the above inspections.

Signature of Electrician

State License Number

SVRD/SVRS/ AVS CONFIRMATION OF OPERATION

(All to be tested by a certified pool operator)

Date:

Property and address:

Type of SVRD(s) used:

CPO confirming operation:

Please list each device tested, location, pump, and date tested below:

(Ex: vacalert - main pool -pump 1 -operation confirmed 7/1/15)

- 1)
- 2)
- 3)
- 4)
- 5)
- 6)
- 7)
- 8)

* all pools requiring an SVRD will not be allowed to open without confirmation that each device is in good working operation ..

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