



Clayton County Board of Health

Environmental Health

1117 Battlecreek Road * Jonesboro, GA 30236

678-610-7199 Telephone 770-603-4874 Fax

Alpha Fowler Bryan, MD – District Health Director

ABBREVIATED PLAN REVIEW WHEN CONVERTING A SINGLE MAIN DRAIN POOL INTO A MULTIPLE MAIN DRAIN POOL

Pool Name: _____

Address: _____ GA _____
Street Suite/Bldg. No. City Zip Code

Property Owner's Name: _____ Contact No.: _____

Address: _____
Street Suite/Bldg. No. City State Zip Code

Pool Contractor Company Name: _____

Pool Contractor Primary Contact Name: _____

Contact: _____
Phone No. Fax No. E-mail

Date Plans Submitted: _____ Date of Initial Review: _____ Date Plans Reviewed / Approved: _____

Pool Type: Swimming Pool Whirlpool Wading Multi-Purpose Waterslide Special Purpose Spray Pool Zero-depth

Location: Indoor Pool Outdoor Pool **Operation:** Seasonal Year-round **Government-owned:** Yes No

Shape: _____ Perimeter (ft.): _____ Width (ft.): _____

Length (ft.): _____ Min. Depth (ft.): _____ Break Depth (ft.): _____ Max. Depth (ft.): _____

Pool Surface Area: _____ sq.ft. Pool Volume: _____ gallons

Pool Base Material: Gunite Poured Other: _____ Type of Piping: _____

Design Flow Rate:

$$\frac{\text{pool volume}}{\text{turnover rate} * } = \frac{\text{gallons}}{\text{minutes}} = \text{_____ gpm is Design Flow Rate}$$

* For pool - minimum turnover rate 360 minutes (6 hours);
Wading Pool - minimum turnover rate 120 minutes (2 hours);
Whirlpool - minimum turnover rate 30 minutes (½ hour)

**Check minimum skimmer flow rate. If turnover time is inadequate for minimum skimmer operation (as per manufacturer or 25 gpm) then design flow rate must be increased to provide minimum skimmer flow rate.

Main Drain:

A. Select pipe size that gives maximum 6 fps. velocity at the Design Flow Rate:

Pipe size (inches): _____ Design flow rate (gpm): _____ Velocity (fps.): _____

Separation distance between main drains when measured center to center (feet): _____

B. Grate Selection: Minimum 2 main drains required; each main drain must accommodate 100% of the Design Flow Rate; each drain outlet pipe open area to drain grate open area ratio must be minimum 4 to 1; maximum 1½ fps. velocity through each drain grate:

(1) Frame / Grate Manufacturer: _____

Frame / Grate Part Number: _____ Grate Open Area: _____ sq. in.

(2) Drain outlet pipe open area to drain grate open area ratio must be minimum 4 to 1:

Pipe Size: _____ in. Pipe Open Area: _____ sq. in. Grate Open Area: _____ sq. in.

Pipe Open Area = _____ sq. in. X 4 = _____ sq. in. < Grate Open Area _____ sq. in.

Is drain outlet pipe open area to drain grate open area ratio approved? Yes / No

(3) Maximum velocity through each grate 1½ fps.

(0.321 x Design Flow Rate _____ gpm) / Grate Open Area _____ sq. in. = Velocity _____ fps

Velocity _____ fps. < 1.5 fps.

Is velocity through each drain grate approved? Yes / No

(4) Is the Main Drain Grate VGB Compliant? Yes / No

(5) Grate Approved: Yes / No

For additional drain grates use additional sheet(s)

Pump Selection:

Total Dynamic Head (TDH) Required = _____ ft. *

** If the TDH is unknown, you may use the following values: Sand Filters - 60, Diatomaceous Earth - 50, Cartridge - 90*

Pump Manufacturer: _____ Model: _____ Horsepower: _____

Pump Rated: _____ gpm @ _____ TDH Number of pumps: _____

Pump specification sheet with performance curve submitted: Yes / No

Filter Selection:

Minimum Filter Area Required = $\frac{\text{Design Flow Rate}}{\text{Filter Flow Rate}^*}$ = $\frac{\text{_____ gpm}}{\text{_____ gpm/sq.ft.}}$ = _____ sq. ft.

**Use manufacture's Filter Flow Rate (In absence of that information use the following Filter Flow Rates: Diatomaceous = 1 gpm / sq. ft.; Hi-rate Sand = 15 gpm / sq. ft.; Cartridge = .3 gpm / sq. ft)*

Manufacturer: _____ Model: _____ Catalog No.: _____

Filter Type: _____ Diameter (each filter): _____ inches

Filter Area (each): _____ sq. ft. No. of Filters: _____ Total Filter Area: _____ sq. ft.

Other Information:

Indicate which chart used for velocities: _____

Certified Contractor's Signature: _____ Date: _____

Reviewing Environmentalist's Signature: _____ Date: _____