



City of Rockwall
The New Horizon

CITY OF ROCKWALL PUBLIC SWIMMING POOL & SPA OPERATING PERMIT

Send paperwork & payment to:
City of Rockwall
Attn: NIS DEPT.
385 S. Goliad St.
Rockwall, TX 75087

POOL FACILITY NAME: _____

POOL LOCATION _____

PHONE# _____ EMAIL ADDRESS: _____

FUTURE INVOICE MAILING ADDRESS: _____

EMAIL ADDRESS: _____

PROPERTY MANAGEMENT COMPANY: _____

CONTACT PH# _____ 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 attached to pump? If yes _____ NO _____

If yes, please provide operation confirmation documentation

POOL INFORMATION	POOL FEES	
Number of Pools: 1 2 3 More _____	1 st & additional Swimming Pools	225.00 each Annually
Number of PIWFs 1 2 3	Splash Pad	225.00 each Annually
Number of Spas: 1 2 3 More _____	Free Standing Spa(s)	25.00 each Annually
	Re-Inspection Fee	50.00 as needed
	Late Fee	30.00 as needed

Please indicate type of suction cover with model number, AMSE/ANSI certification confirmation number, installation and expiration date... Replaced in March 2021 – 8 inch Round waterway covers _____

SCOPE OF PERMIT: To control and regulate the design, construction, operation, and maintenance of all public swimming pools, spas & PWIF's within the City: to provide for the issuance of operating permits and to provide penalties and remedies so that health and safety hazards may be minimized.

Applicants Signature _____ Date: _____

Approved: _____ Date: _____

(Neighborhood Improvement Services Representative)



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

SWIMMING POOL/SPA ELECTRICAL REQUIREMENT CERTIFICATION

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 5 feet 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 ..