PUBLIC POOL PLAN REVIEW SERVICE REQUEST

Environmental Health Division Recreational Waters Program

5050 Commerce Drive, Baldwin Park, CA 91706 www.publichealth.lacounty.gov/eh | rhealth@ph.lacounty.gov | (626) 430-5360

Date of Request: If this plan submission is for a FIRE REBUILD, please indicate which fire:										
IE VER	NAME: PHO		PHONE#:	HONE#:		EMAIL:	EMAIL:			
SITE	MAILING ADDRESS: CIT		CITY:	CITY:		•		STATE:	ZIP:	:
SITE	FACILITY NAME: APN (REQUIRED FOR NEW P						OOLS):			
JOB	ADDRESS:		CITY:				ZIP:			
POOL CONTRACTOR	COMPANY NAME:			CONTRACTOR'S NAME:						
	MAILING ADDRESS:		CITY:					STATE: 2		•
	PHONE #:	EMAIL:	_1		LICENSE #:		LICENSE TYPE:			
CC	CONSULTANT'S NAME: PI		PHONE #:	HONE #:		EMAIL:	EMAIL:			
	RACTOR, ARCHITECT, OR				OFNICE #			1105	V65 5 V6	-
NAME: PHONE #:				"	LICENSE TYPE:			E;		
				<u> </u>						
TYPE	OF POOL (A separate serv	vice request is req	uired for eac	h body	of wat	er)				
☐ Swi	mming Pool $\ \square$ Spa $\ \square$ V	Vading Pool 🔲 Spra	ay Ground (Inter	active w	ater feat	ure) \square	Other Po	ool:		
APARTI	MENT BUILDING, CONDO, OR I	HOTEL:	F UNITS:		□ NO					
SERVI	CE REQUEST									
☐ Major Renovation <3000' sq & 40 ft wide \$				0 🗆 1	☐ Minor Renovation Single Item			\$354.00		
☐ Major Renovation Additional <3000' sq & 40 ft wide				0 🗆 1	☐ Minor Renovation Two Items			\$544.00		
☐ Major Renovation Large >3000' sq & 40 ft wide			\$1,306.0	0 🗆 1	☐ Minor Renovation Three or More Items			\$680.00		
☐ Major Renovation Large Additional >3000' sq & 40 ft wide					☐ Minor Renovation Additional Pool/Spa			\$245.00		
☐ New Pool Large >3000' sq & 40 ft wide				0 🗆 F	☐ Pool Resurface			\$721.00		
☐ New Pool Large Additional >3000' sq & 40 ft wide			\$1,796.0	00 🗆 F	☐ Pool Resurface Additional Pool/Spa			\$408.00		
☐ New Pool <3000' sq & 40 ft wide			\$1,796.0	0 🗆 F	☐ Field Consultation (up to 1 hour)			\$163.00		
☐ New Pool Additional <3000' sq & 40 ft wide				00 🗆 F	☐ Field Consultation (up to 2 hours)				\$327.00	
					Other:					
# of Plans Subm				: <u> </u>				Total	Fee \$	

	SUBMIT A COPY OF CURRENT PUBLIC HEALTH PERMIT/LICENSE AND PROVIDE THE FOLLOWING INFORMATION:								
	FA#: PR#:								
INFORMAITON	Dimensions of pool:	Gallons:	Year pool built:	VGB Compliant: ☐ Yes ☐ No					
	Existing pump model/hp:	Suction line size:	Return line size:	Material: ☐ PVC ☐ Copper					
VFOR	If spa, booster pump model/hp:	Suction line size:	Return line size:	Material: ☐ PVC ☐ Copper					
POOL II	Grates/drain covers make/model:								
PO	What is being done/changed:								

PLAN SUBMISSION AND PAYMENT

The Review/ Service Request, plans, supporting documents, and payment can be submitted in person, by mail, or electronically.

- If plans are submitting online, an invoice will be generated and emailed to you along with payment instructions.
- Do not submit your payment until you have received an invoice.

IN-PERSON:

Submit plans and payment in person between the hours of 8:00 am - 4:30 pm, Monday through Friday, except for holidays, at:

Environmental Health Headquarters 5050 Commerce Drive, Baldwin Park, CA 91706

Acceptable forms of in-person payment include electronic, cash, check, cashier's check, or money order in the exact amount due.

ELECTRONICALLY:

Submit plans and payment online using Credit Card (Visa, MasterCard, American Express, or Discover), Debit Card, and Electronic Check (ECheck).

Email to rhealth@ph.lacounty.gov retrieve a secured email.

Please note that there is an additional convenience fee charge using online payment.

MAIL:

Mail plans to the address below. An invoice will be generated and emailed to you along with payment instructions. Make Check, Cashier's Check, or Money Order payable to **County of Los Angeles**, and include your invoice number.

Mail to:

Environmental Health Headquarters Attn: Recreational Waters Program 5050 Commerce Drive, Baldwin Park, CA 91706

FOR OFFICE USE ONLY								
DATE:	AMOUNT PAID:	INVOICE #:	☐ Cash ☐ Credit Card ☐ Check					
ASSIGNED TO:	PLANS ACCEPTED BY:	PLAN CHECK #:	SR#:					